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ROLE PERCEPTION OF SUPERINTENDENTS
OF PUBLIC RESIDENTIAL FACILITIES FOR THE RETARDED:
A NATIONAL STUDY

A Dissertation Presented

By

Daniel Joseph O'Connell

Submitted to the Graduate School of the
University of Massachusetts in partial fulfillment
of the requirements for the degree of

DOCTOR OF EDUCATION

May, 1984

EDUCATION

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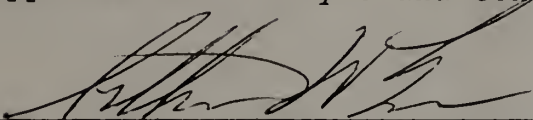
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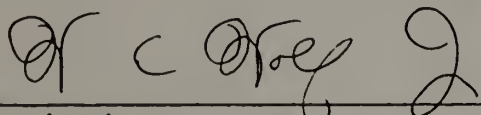
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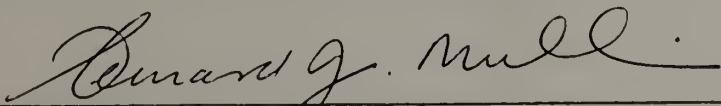
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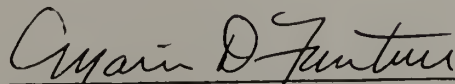
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In many ways this study is more than a dissertation project to me. It represents the culmination of an intense process which has been both personally stimulating and immensely challenging. Equally significant, it represents the accomplishment of a personal goal which was previously thought to be unrealistic. I wish to acknowledge and thank the many individuals who assisted me in this pursuit.

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professional colleagues who offered me encouragement.

The endorsement and participation in this study of the National Association of Superintendents of Public Residential Facilities for the Mentally Retarded is acknowledged and appreciated. It is my hope that the knowledge contained in this report will be of assistance to the membership.

Finally, I would like to thank my wife Kathy for the confidence and support which she gave me throughout this entire project. Without that, this study would not have been accomplished.

ABSTRACT

Role Perception of Superintendents of Public Residential Facilities for the Retarded: A National Study

(May 1984)

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The care and treatment of persons with mental retardation in the United States is in a period of significant change. A trend has been clearly established in which large institutions for the retarded are being drastically reduced in size or closed and replaced by a system which utilizes community based living for retarded persons as its foundation.

Superintendents of public residential facilities for the retarded occupy a unique position at this time. As institutions are reduced in size or closed, the role of the Superintendent is changed significantly and, in some cases, eliminated.

The purpose of this study was to survey perceptions of Superintendents of public residential facilities for the retarded in the United States regarding various

aspects of their role during a period of significant philosophical and programmatic change. The study consisted of two parts. The first was a case study of three Superintendents in which specific role issues of importance were identified. The second was a survey of all Superintendents in the United States based upon the case study.

This study was conducted in February of 1983. At that time there were 274 Superintendents in the United States. A total of 196 (71.5%) participated in this study. Among the conclusions reached are that Superintendents believe in the development of small community based housing for the retarded and are not concerned about their personal future because of this trend. They wish to be perceived as change agents who improve the quality of life of retarded persons. In spite of public criticism, they are genuinely proud of the facilities they administer, like their jobs and want to continue in them. Although they feel the job has had a positive effect upon them as individuals, it is more demanding than most people realize and at times results in feelings of personal isolation.

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C H A P T E R I

INTRODUCTION

The care and treatment of persons with mental retardation in the United States is in a period of significant change. A trend has been clearly established in which large institutions for the retarded are being drastically reduced in size or closed. They are being replaced by a system which utilizes community living as its foundation.

Movement away from institutional care is occurring throughout the country. Based in part on the concept of Normalization (Wolfensberger, 1972), this trend is referred to as "deinstitutionalization" or "the group home movement." It represents a major shift in public policy concerning the care and treatment of the mentally retarded.

Superintendents of public residential facilities for the retarded occupy a unique position at this period of time. They are being asked to provide the leadership and direction necessary to accelerate the shift away from the institutions for which they are responsible. As institutions reduce in size or are closed, the role of Superintendent is changed significantly and, in some

cases, eliminated.

Understanding the thoughts and opinions of Superintendents of public residential facilities for the retarded is important to the deinstitutionalization movement in the United States. This study addresses the role perception of this group.

Background of the Problem

The care and treatment of persons with mental retardation is a major concern and responsibility of society in the United States. Many mentally retarded persons will be unable to meet their basic personal needs without some type of care and supervision for the duration of their lives. The more severely handicapped individuals will continue to require highly specialized, constant care. In a country which maintains a public commitment to care for its less fortunate citizens, this represents a significant social challenge.

Mentally retarded persons have been a part of society since the history of mankind. Although not always recognized, and in some cases actually hidden, society's responsibility for the retarded is obvious. In spite of scientific discoveries, the need to provide modern, quality care and treatment for a sizeable proportion of our society remains constant. Cohen (1982) has concluded:

Depending on methods of classification and varied estimates, mental retardation affects anywhere from 1% to 3% of the total population of the country.

(p.424)

A vast comprehensive industry has developed in the United States in response to the need to provide for the retarded. Persons with retardation receive services in various settings including specialized schools, day care programs, pre-school programs, sheltered workshops, group homes and nursing facilities. The list of available programs and services is varied and extensive.

It is difficult if not impossible to determine the total, accurate cost of care for the retarded in this country. There is no single, standardized national cost reporting mechanism available in this field. Additionally, many of the costs are unknown and would go unreported. Cohen (1982, p.424), however, estimates that the annual national expenditure for services to the retarded currently is in excess of twelve billion dollars.

The use of public residential facilities is a major resource for meeting the needs of mentally retarded persons in this country. Scheerenberger (1982) reported that in 1982 two hundred and seventy nine (279) state operated residential facilities served an average daily population of 119,335 mentally retarded persons. This represents a public expenditure of \$3,781,613,848, or an average per capita cost of \$16.33 for every citizen of the

United States.

Public reliance upon the use of institutions as the backbone of the service delivery system has come under close scrutiny and intense criticism during the past two decades. Frequently public expose's of inhumane, grossly inadequate care in public residential facilities have stimulated public debate concerning the appropriateness of this form of care. Graphic reports of thousands of persons spending most of their adult lives existing in sub-human conditions have focused public and legislative attention upon the plight of an element of society unable to speak for themselves. (Blatt & Kaplan, 1966)

Phil Roos (1975), the former Executive Director of the National Association for Retarded Citizens, summarizes the criticism of public residential facilities for the retarded as being directed at the following five areas:

1. Dehumanizing conditions, often violating the human and legal rights of the residents.
2. Unsanitary and hazardous conditions, sometimes endangering the health and safety of residents.
3. Conditions fostering regressive and deteriorative changes in residents.
4. Self containment of institutions, mitigating against return of residents to community living.

5. Until very recently, exploitation of residents as institutional laborers and as experimental research subjects.

One outgrowth of the concern about the adequacy of institutional care has been a rapid increase in the development of small, community based housing for the retarded. Advocates of this concept argue that a retarded person's growth and development is significantly accelerated in the smaller, more normal homelike environment offered in community living (Landesman-Dwyer, 1981). In most instances, the quality of life afforded the individual is determined to be superior by casual observation.

The use of community based housing for the retarded has increased dramatically during the past decade. Bruinks (1979, p.56) reported that the total number of community residences for the retarded nationally approximately doubled between January, 1973 and June, 1977. His 1977 study reported 4,427 community residences with a capacity of 83,688 mentally retarded persons. To gain additional perspective, in 1965 seventy-nine new community residences were opened nationally, and in 1975 six-hundred and five were added (Bruinks, p.58). This represents a significant rate of growth as well as a shift in public policy regarding services for the retarded in this country.

Use of community residences for the retarded are serving two purposes. First, they offer an alternative to institutional care for persons in need of placement. Many persons who in the past might have been placed directly into an institution are now finding care available in community residences. Second, they offer an opportunity for institutionalized persons to re-enter community living. Mentally retarded persons are placed out of institutions into community residences as an essential component of the deinstitutionalization movement.

This departure from tradition is confirmed by statistics showing the average daily population in public residential facilities for the past decade. In one such report, Scheerenberger (1982, p.4) stated that the average daily population in public institutions decreased steadily from 189,546 mentally retarded persons in 1971 to 119,335 mentally retarded persons in 1981. This represents a reduction of 70,211 individuals, or 37% fewer persons being cared for in institutions during a ten year period of time.

It appears that this trend will continue. Throughout the country, capital investment in construction of public residential facilities has decreased while investment in community residences has increased dramatically. In a Delphi study conducted by Susan Roos (1978, p.355), thirteen nationally recognized experts

predict that large institutions of five hundred or more retarded persons will be phased out by the end of this century as community based care becomes more available.

Court litigation has been an instrumental force in support of this trend. In 1980, litigative action concerning the rights of the mentally retarded affected two-thirds of the states in this country. (Bergdorf, 1980) Actions are brought against state institutions for the retarded on the basis of violation of the Fifth, Eighth, Thirteenth and Fourteenth Amendments of the United States Constitution. The Constitutional concept that government must use the least drastic means available to accomplish its goals is being applied to challenge the legal validity of institutions (Susan Roos, 1978, p.4).

The Problem

The major shift from institutional care for retarded persons to a system of community based residences has placed the role of Superintendent of a public residential facility for the retarded in a unique position. Historically this person has exercised tremendous power over the lives of staff and clients. As the role of institutions has been diminished and altered, so too has the role of Superintendent.

The Superintendent has been a named defendant in

most litigation aimed at reducing the size of or closing institutions. As such, he or she is accused of being responsible for grossly inhuman care of persons incapable of caring for themselves. It is professionally degrading.

The Superintendents who have not been directly involved in litigation are also taking part in a process in which the size of their facilities is being reduced and in some cases closed. Scheerenberger's (1982, p.4) national statistics show the speed with which this trend has occurred.

Marie Crissey (1975) succinctly sums up the paradox which the Superintendents face:

One issue or change has been the dramatic swing from the focus on institutional care to community placement. Few social reversals have occurred as quickly. Inevitably dislocations, friction, smoldering resentment, unexpected obstacles, veiled hostilities and footdragging have occurred. There have been some dramatic successes and some carefully screened over failures (p. 808).

The ways in which administrators perceive and react to change have a profound effect upon the intended outcome of the program. It is important to recognize that program administrators have strong feelings about change which impacts upon their role. Those feelings influence the degree to which program objectives are reached.

Superintendents of public residential facilities for the retarded occupy a major leadership position in the spectrum of services available to the retarded in this

country. Because of the dramatic shift from institutions to community based care occurring in this country, the perception which these individuals have of various aspects of their role is a significant element in shaping the future service delivery system. Added knowledge and insight into the role perception of Superintendents at this critical period in the evolution of services to the retarded is important to this field.

Purpose of the Study

The general purpose of this study was to survey perceptions of Superintendents of public residential facilities for the retarded in the United States regarding various aspects of their role during a period of significant philosophical and programmatic change. The specific purposes of the study were:

1. To identify role issues of importance and concern to selected Superintendents of public residential facilities for the retarded.
2. To ascertain the extent to which identified role issues can be generalized to a population of Superintendents of public residential facilities for the retarded.

3. To identify various characteristics of the individuals who occupy the position of Superintendent of public residential facilities for the retarded.
4. To identify patterns of responses of Superintendents regarding their role during a period of significant philosophical and programmatic change.

Significance of the Study

This study is an exploratory examination of specific administrators of public programs which are in the process of major change. The significance of this study is the knowledge gained concerning the perception which top level administrators have of their role during a period of dramatic organizational change.

Often the importance of understanding how individuals think and feel about their role in an organization is overlooked. Their perception is not only important to the individual, but to the organization as well. The ways in which staff members perceive and react to change have a definite impact upon the ultimate outcome of the program. This is especially true of those persons assigned a position of leadership.

In addition to determining the direction of a

program, the chief administrator of an organization also contributes significantly to the climate in which people are expected to perform their duties. How the leader thinks and feels about his or her role is of critical importance to the tone established in the work setting. The thoughts and feelings of the chief administrator not only affect his or her performance but the performance of staff as well.

Specifically, this study is significant because of the added insight it will give into the personal thoughts, feelings and perceptions of public residential facility administrators in the United States during an important period in the evolution of services to the retarded. This knowledge does not appear to be available elsewhere in an organized, comprehensive format.

The knowledge gained from this study is of special interest and importance to the following individuals:

1. Superintendents of public residential facilities for the retarded who wish to compare their perspective of various aspects of their role with the perspective of Superintendents throughout the country.
2. State directors of mental retardation programs who are interested in more fully understanding how this group of significant program leaders

thinks and feels about various aspects of their role.

3. Persons who may aspire to the position of Superintendent who are interested in learning how individuals who occupy this position perceive their role.
4. Staff who are employed in public residential facilities for the retarded who wish to more fully understand the perspective of this group.
5. Students interested in the evolution of services to the mentally retarded in the United States and the relationship between organizational change and role perceptions of chief administrators.

Design of the Study

This study consisted of two parts. The first was a case study of three Superintendents of public residential facilities for the retarded in which specific role issues of importance to these individuals were identified and recorded. The second was a survey of all Superintendents in the United States based upon the data generated through the case study.

Two Superintendents were chosen to participate in the case study based upon their availability and

willingness to participate in this project, as well as their ability to articulate issues and concepts clearly. The third participant in the case study was the researcher who occupies the position of Superintendent of a public residential facility for the retarded. These three individuals provided the initial data upon which this study was conducted.

The case study consisted of an unstructured interview of the three participants using an interview guide. The purpose of the interview was to allow the participants to identify specific role issues of importance to them. The interview guide was developed by the researcher based upon available literature as well as his knowledge and experience as Superintendent.

The three interviews were conducted privately and tape recorded. The tape recordings were transcribed and the data analyzed by both listening to the recorded discussion and studying the written transcription. The data were analyzed inductively relative to the topics included on the interview guide.

Content analysis of the data produced themes, recurring patterns and points of similarity or difference among the participants regarding various perspectives of their role as Superintendent. This process led to the identification of six core issues of importance to these individuals. These issues served as the basis of the

survey questionnaire administered nationally to all Superintendents.

A draft of the questionnaire used was discussed in a group meeting with the case study participants to ensure that it reflected the core issues identified. Based on this discussion, the questionnaire was modified and presented at a second meeting. In this way, agreement was reached that this instrument reflected the core issues of this group.

Five additional Superintendents of public residential facilities for the retarded were chosen to pre-test the questionnaire. The instrument was administered to them in a group meeting. Subsequent group discussion identified questions and terminology which were unclear to the participants. Modifications to the final instrument were made accordingly.

The questionnaire used in this study consisted of two parts. One contained thirty-two (32) statements for which the participants were asked to record their agreement or disagreement according to a five point Likert-type scale. The second consisted of five open-ended questions which solicited written statements from the participants regarding the perception they have of various aspects of their role.

The questionnaire was administered in a group

meeting to fifty-eight (58) Superintendents of public residential facilities. It was then mailed to the two-hundred and fifteen (215) Superintendents nationally who were not in attendance at the group meeting. Of the two-hundred and seventy-four (274) Superintendents recorded by the National Association of Superintendents of Public Residential Facilities for the Retarded in February of 1983, one-hundred and ninety-six participated in this survey. This represents 71.5 % of the universe. The researcher did not participate in the final survey.

All quantitative data were then coded and keypunched for computer analysis. The Statistical Package for the Social Sciences (S.P.S.S.) program was used to perform the statistical tabulations and analyses. The qualitative data were transcribed onto large worksheets for the purpose of content analysis.

Organization of the Study

This study is presented in seven chapters as follows:

CHAPTER ONE: THE INTRODUCTION

This chapter will consist of an overview of the study including the background of the problem, the statement of the problem, the purpose of the study, the significance

of the study, the design of the study and its organization.

CHAPTER TWO: REVIEW OF THE LITERATURE

This chapter will include an indepth review and presentation of relevant literature regarding the status and trends of public residential services for the retarded in the United States for the past ten years. Relevant literature concerning the process of organizational change will also be reviewed and presented.

CHAPTER THREE: THE DESIGN OF THE STUDY

This chapter will contain a detailed description of the design of the study, including relevant literature supporting the use of both qualitative and quantitative methodology.

CHAPTER FOUR: THE CASE STUDY

This chapter will contain selected sections of the case study including a discussion of the six core issues identified through this process.

CHAPTER FIVE: PRESENTATION OF THE QUANTITATIVE DATA

This chapter will report the characteristics of those who participated in the

national study and present, analyze and discuss the quantitative data discovered in this study.

CHAPTER SIX: PRESENTATION OF THE QUALITATIVE DATA

This chapter will present, analyze and discuss the qualitative data discovered in this study.

CHAPTER SEVEN: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

This chapter will consist of a summary of the study, a presentation of the conclusions reached and specific recommendations for further study.

CHAPTER II

REVIEW OF THE LITERATURE

Introduction

In this chapter, the researcher reviews the current literature which deals with trends and issues concerning the care and treatment of mentally retarded persons in the United States. Specific attention is given to that section of the literature which addresses the role of institutions and the trend toward increased use of community residences as a major component of the service delivery system for retarded citizens.

This chapter begins with a discussion of the evolution of various definitions of mental retardation and the historical development of services which rely upon the use of institutions as the backbone of the service delivery system for the mentally retarded. Public policy which evolved during the past two decades supporting the principles of normalization and deinstitutionalization is presented and discussed. Several studies of various aspects of institutional and community based care are presented in this chapter.

Litigation and the use of courts has played a major role in the evolution of services to the retarded in the

United States. This chapter addresses the impact of the judicial system upon the deinstitutionalization movement and discusses several significant court decisions. Statistics documenting the decline in the use of institutions and the corresponding rise in the use of community residences for the retarded are presented.

This chapter concludes with a discussion of the impact which these trends and issues have had upon the role of Superintendents of public residential facilities for the retarded in the United States. Relevant literature from several sources and disciplines is referred to and documented throughout the chapter. A brief summary discussing the relationship of the identified literature with the purpose of this study is the final component of this chapter.

Definitions of Mental Retardation

The mentally retarded have been called dumb, stupid, immature, defective, deficient, subnormal, feeble-minded, incompetent, and dull. In addition, during earlier eras, the word 'idiot' and 'fool' were commonly used to refer to mentally retarded individuals (Kauffman & Payne, 1975, p.23).

At the outset of this chapter, it would be important to arrive at a clear, commonly accepted definition of the condition of mental retardation. Unfortunately, this is not possible. Various definitions of mental retardation have evolved over the course of time, revealing both

society's understanding of the condition and attitude toward those afflicted. The President's Committee on Mental Retardation (1975, p.2) maintains that these efforts are certain to continue.

In 1846, Samuel Gridley Howe addressed the needs of feeble-minded persons who were, in a sense, perpetual children. In a crude way, he distinguished between the needs of simple individuals who required guidance and others whom he referred to as mere organisms (Davies, 1959).

Henry Goddard attempted to subdivide the feeble-minded into classifications according to their degree of incapacity. In 1914 he used the terms moron, imbecile and idiot to distinguish between levels of functioning of the retarded (Davies, 1959). This was an initial attempt to develop a classification system based upon the recognition that not all of the feeble-minded were identical.

Considerable effort has been expended to develop a universal classification system based upon standardized testing. In 1916, Terman (1960) introduced groupings of ability related to IQ scores obtained on the 1916 Binet intelligence test. These classifications were included in the 1937 and 1960 revisions of the Binet, and incorporated into the Wechsler Intelligence Scale for Children (WISC). The contemporary classification of retarded individuals

as mild, moderate, severe and profound is the result of these efforts (Kauffman & Payne, 1975).

To this day, one of the most widely used definitions of mental retardation was developed in the 1930's. Tredgold (1937) defined mental retardation as "a state of incomplete mental development of such kind and degree that the individual is incapable of adapting himself to the normal environment of his fellows in such a way to maintain existence independently of supervision, control or external support (p. 4)." It is significant that this definition emphasizes the ability of the individual to adapt to peers and his or her environment. Kauffman and Payne (1975, p.25) observe that the emphasis on adaptive behavior, although not universal, is common to most contemporary definitions of mental retardation.

Edgar Doll (1941) extended the definition of mental retardation in 1941 when he stated:

We observe that six criteria by statement or implication have been generally considered essential to an adequate definition and concept. These are (1) social incompetence, (2) due to mental subnormality, (3) which has been developmentally arrested, (4) which obtains at maturity, (5) is of constitutional origin, and (6) is essentially incurable (p.215).

Kauffman and Payne (1975) observe that many definitions of mental retardation are available today and conclude that the most commonly accepted is that of the

American Association on Mental Deficiency, developed by Rick Heber and revised by Herbert J. Grossman. The President's Committee on Mental Retardation (1977) concurs with this definition, recognizing that it is the "culmination of long debate and revision, and may well be modified in the future (p. 143)." It identifies mental retardation with subnormal functioning in areas of both intelligence and social adaptation. The formal definition of the American Association on Mental Deficiency is as follows:

Mental retardation refers to significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior, and manifested during the developmental period. Adaptive behavior is defined as the effectiveness or degree with which an individual meets the standards of personal independence and social responsibility expected for age and cultural group (Grossman, 1973, p.5).

As might be expected, considerable controversy exists in the United States concerning the incidence and prevalence of mental retardation. Estimating the prevalence of mental retardation in the United States is difficult and imprecise. Kauffman and Payne (1975) state that "obviously, as definitions of mental retardation change, prevalence figures will change (p. 37)." The President's Committee on Mental Retardation (1977) identify the principal problems associated with prevalence estimates as not only definition and criteria, but also the absence of uniform and centralized data collection.

A number of prevalence studies have concluded with observations concerning the problems associated with the lack of precision in defining mental retardation and the general haziness of the concept itself (Dunn, 1963; O'Connor, 1965; Penrose, 1966). In a study which illustrates the extent of these problems, Heber (1970) reviewed twenty-eight prevalence surveys and discovered a range of mentally retarded from 0.16 percent to 23 percent of the general population, with a median of 1 percent.

The President's Committee on Mental Retardation (1967) estimates that 3 percent of the general population of the United States is retarded. Kauffman and Payne (1975) report that this is the figure most frequently used and, although not universally accepted, currently serves as the best indicator of the extent of retardation in this country. In effect, this means that it is estimated that approximately 6.5 million citizens of this country are retarded.

Retardation varies in severity from mild to profound levels. Farber (1968) estimates that 89 percent of those afflicted are mildly retarded, indicating that they are marginal and educable. He estimates that another 6 percent are moderately retarded and thought to be trainable. According to his estimates, 5 percent of the retarded in the United States are severely or profoundly retarded and, as such, totally dependent upon others for

their basic care.

History of Treatment and Services

"The early history of treatment of the retarded is obscure (Kauffman and Payne, 1975, p.iv)."

The retarded and persons with other forms of affliction have probably been part of every segment of the evolution of mankind throughout the world. There are references to retarded individuals in the literature of the Greek and Roman empires, as well as the Bible. Misunderstood and feared because of their grotesque appearance, they were frequently exiled or put to death. It wasn't until the twelfth century when the retarded were legally made wards of the king that their plight began to improve ever so slightly (Kauffman & Payne, 1975).

Several sources have attempted to document the history of care and treatment of the retarded (Dunn, 1973; Kolstoe & Frey, 1965; Oberman, 1965; Roberts, 1965). Kolstoe and Frey (1965) have identified five distinct eras in the history of services and treatment of this population. The vestige of these phases of history can still be seen in contemporary attitudes of some segments of society toward retarded people.

1. The Era of Extermination in which handicapped individuals were seen as a burden to society and

systematically killed or allowed to die.

2. The Era of Ridicule in which the mentally retarded were kept alive under lowly conditions for the enjoyment and entertainment of noblemen. The infamous court jesters of the Middle Ages reflect this era.

3. The Era of Asylum in which a more enlightened view of the disabled as worthy of life led to their becoming wards of the church and cared for in monasteries and asylums.

4. The Era of Education during the eighteenth century when a shift from custodial care to education and primitive training allowed society to focus, for the first time, on the potential of the retarded.

5. The Era of Occupational Adequacy beginning in the 1940's in which numerous vocational training programs were developed which focused on teaching retarded individuals the basic skills necessary to work.

The use of public sponsored institutions to care for the retarded in the United States has occurred during the last one-hundred forty years. The first public institution for the retarded was started in the Commonwealth of Massachusetts in 1848 in a wing of a state school for the blind. Currently known as Fernald School and recognized as the oldest institution in the country, this new venture was called the Massachusetts School for Idiotic Children and Youth. It was expected to care for and educate ten mentally retarded children and given a total annual allo-

cation of \$2,500 from the legislature (PCMR, 1977).

Other states quickly followed the lead of Massachusetts. State operated residential schools to care for and educate the retarded were opened in New York (1851), Pennsylvania (1853), Connecticut (1858), Ohio (1859) and Kentucky (1860). By 1900 in excess of 7,000 mentally retarded persons were residents of public operated institutions throughout the country (PCMR, 1977).

Dr. Samuel G. Howe was the Director of the Massachusetts School for Idiotic Children and Youth from its beginning in 1848 until his retirement in 1874. Almost from the day this institution opened its doors until his retirement, Dr. Howe and his colleagues expressed concern about the potential abuses of institutionalization and continued to seriously question whether it was even desirable for mentally retarded people to live in such facilities. After twenty-six years of scholarly concern and daily experience operating the first institution for retarded people in the United States, Dr. Howe's final report to the school's trustees is prophetic:

Now the danger of misdirection in this pious and benevolent work is that two false principles may be incorporated with the projected institutions which will be as rotten piles in the foundation and make the future establishments deplorably defective and mischievous. These are, first, close congregation; and second, the life-long association of a large number of idiots.

Whereas, the true, sound principles are: separation of idiots from each other and then diffusion among the normal population. . . . For these and other reasons it is unwise to organize establishments for teaching and training idiotic children upon such principles as will tend to make them asylums for life. . . . Even idiots have rights which should be carefully considered!

At any rate, let us try for something which will not imply segregating the wards in classes, removing them from our sight and knowledge, ridding ourselves of our responsibility as neighbors and leaving the wards closely packed in establishments where the spirit of pauperism is surely engendered and the morbid peculiarities of each are intensified by constant and close association of others of his class (Howe, 1874).

As the number of mentally retarded people placed in institutions grew in size, so too did the concern of professionals in the field at the time. Early in the 1900's isolated attempts to reduce the rate of institutionalization began to appear throughout the country. Programs intended to offer alternatives to institutionalization were advocated and implemented as early as 1916 by Bernstein (1916) and Fernald (1919).

Criticism of institutions to care for and educate the retarded continued to grow in the 1920's. Doll and Longwell (1934) concluded that institutions were unsuccessful primarily because the programs were designed to prepare the retarded person for life in the institution rather than for return to society. They also cite the regimentation intrinsic to institutions as detrimental to the growth and development of the retarded.

By the early 1930's, most institutions were actively involved in getting residents out of the institution and back into the community (Lakin, Bruininks & Sigford, 1981). Scheerenberger (1981) notes this shift in attitude away from institutions as follows:

While the term 'deinstitutionalization' is relatively new, its basic premises and practices are not. Though there was a brief historical moment when institutions were theoretically viewed as being the sole answer to the problem of mental retardation, the idea was quickly abandoned as both unwise and impractical (p. 3).

In spite of the criticisms of institutions and continued isolated efforts to reduce their use, the number of mentally retarded people placed in institutions in the United States continued to grow steadily. The President's Committee on Mental Retardation (1977) notes that in the period of 1925 to 1950, institutional populations grew at the greatest rate ever, reaching 128,000 people in 1950.

Between 1950 and 1967, public residential facilities in the United States increased their population by 38 percent. A peak was reached in 1967 and the trend has been downward since that time (Lerman, 1981).

The trend regarding the use of institutions for the retarded followed a similar pattern in the mental health field. Use of institutions for emotionally disturbed people in this country reached a peak in 1955 and has steadily been reduced since that time (Conroy, 1977).

Public Policy

The care and treatment extended to retarded citizens at any given time in history can be seen as an extension of the norms and values of society at that time. The evolution of services for the retarded reflect the evolution of social consciousness in this country. Lakin, Bruininks and Sigford (1981) write about the influence of social attitude: "Throughout the history of care for persons perceived as mentally abnormal, social attitudes toward such persons have strongly influenced their treatment. These attitudes have often permitted insensitive and at times cruel treatment of the mentally handicapped. . . (p. 29)."

Beginning in the early 1960's, social awareness and concern for the retarded increased dramatically. Kolstoe and Frey (1965) refer to this as the "Era of Combating Mental Retardation." Leona Bachrach refers to the accelerated deinstitutionalization of mentally retarded people during the past twenty years as "one manifestation of the social reform movement that has for several decades prevailed in the nation (p. 51)."

Bruininks et al. (1981) also address the basis of the deinstitutionalization movement in this country:

What has followed in the 1970's can only be attributed to a philosophic and social revolution as radical and sweeping as was the initial movement to build institutions for mentally retarded people in the late 19th and early 20th centuries (p. xi).

One of the major reasons for this shift in public attitude was the election of John F. Kennedy as President of the United States in 1960. Kennedy had a retarded sister. He and his family not only acknowledged her existence but they treated her with love and respect publicly and privately. The country was somewhat jolted to be reminded that someone in the White House had a retarded member of his family. Cohen (1982) states that this was of major psychological importance to the country and led to greater acceptance of the retarded by society.

In a discussion of the provision of service for the retarded, Kolstoe and Frey (1965) stated, "While political philosophy is often thought of as distinct from educational philosophy, the close relationship between political philosophy and the treatment of the disabled seems inescapable (p. 3)." Although this has been true throughout the history of services to the retarded, it became much more obvious beginning with the Kennedy administration.

In October of 1961, President Kennedy appointed a panel of distinguished scientists, educators and laymen to prepare a national plan to combat mental retardation.

For the first time in our history the retarded were represented at the highest level of government as citizens with special needs. This panel was the forerunner of the President's Committee on Mental Retardation. Elizabeth Boggs (1977) marks this as the beginning of legal advocacy for the retarded.

The President's Committee on Mental Retardation continued to address and expose the plight of mentally retarded persons confined to institutions throughout the country. With thousands of people living in subhuman conditions and frequently receiving little or no training, the committee recognized this as a priority concern of the country. Recognizing the futility of continuing the practice of institutionalizing the retarded, in 1972 the committee recommended to the President that the federal government should actively assist the states in developing community services as an alternative to institutionalization of the retarded (P.C.M.R., 1972).

On March 28, 1974, President Nixon signed Executive Order 11776. This historic document established three national goals for the retarded (Weinberger, 1974):

1. To reduce the occurrence of mental retardation by one-half before the end of the century.
2. To return to the community one-third of the persons presently in public institutions.

3. To assure retarded individuals full status as citizens under the law.

The following year these objectives were partially addressed in a federal law passed by Congress. The right of mentally retarded people to live in the least restrictive setting possible, consistent with their personal needs and level of functioning, is guaranteed in Section 111 of the Developmental Disability Assistance and Bill of Rights Act (42 Federal Register 5291). This law has been relied upon in numerous litigation actions aimed at institutional reform or closing throughout the country.

The thrust toward deinstitutionalization is also reflected in federal standards which regulate programs and services for the retarded. The Interpretive Guidelines for federal Intermediate Care Facility (I.C.F.) certification of institutions for the retarded very clearly demand that institutions do everything possible to train each client for return to community living (H.E.W., 1977). Similarly, the Standard for Services for Developmentally Disabled Individuals issued by the Joint Commission on Accreditation of Hospitals require facilities to demonstrate consistent effort to return each resident to more normal, less restrictive living environments (Joint Commission of Accreditation of Hospitals, 1977). Both of these are very strong public policy statements in support

of deinstitutionalization. Facilities which comply with these standards receive considerable federal financial assistance.

Professional Opinion

During the past two decades a considerable amount has been written about various aspects of the use of institutions or community residences for the care and treatment of the retarded. This is an indicator of the importance of the issue of deinstitutionalization to the field.

Several professional reports are characterized as expose's of abuse and mistreatment of the retarded in institutions. Reflective of investigative journalism, these reports contain vivid, detailed descriptions of the subhuman living conditions of the retarded. The following is an example of this style of reporting. Written by Blatt and Kaplan (1966), it is based upon their visits to several institutions with concealed cameras and tape recorders:

We saw children with hands and legs bound. . . The attendant was, with one assistant, responsible for the supervision of an old multilevel dormitory, housing over 100 severely retarded ambulatory adults. Almost in desperation, he asked us, 'What can one do with those patients who do not conform? We must lock them up, or restrain them, or sedate them, or put fear in them (p. 13).'

After a distinguished career as an educator, administrator and recognized national authority in the field of mental retardation, Burton Blatt (1973, 1977) concludes that the use of institutions for the retarded has been a terrible mistake. This is consistent with others who have reported upon the destructive consequences of the use of institutions (Flint, 1966; Goffman, 1966; Taylor, 1977).

Balla (1976) has identified an inverse relationship between the size of a residential living unit and the quality of care given to the residents. Although he acknowledges the existence of other factors which contribute to the overall care which a person receives, his work supports the concept that smaller, more homelike living environments are preferential for the retarded. George Baroff (1980) reviewed eight separate studies of the relationship between the size of the living unit and the quality of care received and reported that seven showed advantages for the clients who live in smaller units while one study showed no distinct advantage. No study has reported an advantage to living in larger units.

Many studies support the concept of "Normalization" as the most appropriate philosophy for treatment and services for the retarded. Bengt Nirje (1970) defined normalization as "making available to the mentally subnormal, patterns and conditions of everyday life which

are as close as possible to the norms and patterns of the mainstream of society (p. 62)." Wolf Wolfensberger (1972) redefined normalization as "the utilization of means which are as culturally normative as possible in order to establish and/or maintain personal behaviors and characteristics which are as culturally normative as possible (1972)." Gail O'Connor refers to the normalization principle as "the current zeitgeist of changing services for the retarded (p. 2)."

Application of the concept of normalization for persons with all levels of retardation and other handicapping conditions is a major challenge. To some, normalization for the institutionalized means the development of good community residential placement facilities and services (Kugel & Wolfensberger, 1969; Wolfensberger, 1971).

Studies of mentally retarded persons who have been placed in appropriate community based residential settings have found that they are generally more beneficial for the individual than institutional placements (Kushlick, 1976; Gilhool, 1978; Ferleger & Boyd, 1979). Based upon considerable experience and study, Menolascino and McGee (1981) conclude that "given adequate and appropriate community-based alternatives, virtually all of Nebraska's - and the nation's - institutionalized, mentally retarded population can grow and develop in least restrictive,

community alternatives (p. 215)."

Debate exists concerning whether community placement is in the best interest of all retarded persons. Are there not some individuals who, because of the severity of their retardation or other complicating medical or behavioral conditions, may not be appropriate for community placement? Some authorities argue that all persons can be successfully served in community based settings (Dybwad, 1978; Biklen, 1979). Other equally distinguished authorities argue that some individuals will always require specialized institutional care (Ellis, 1979; Baumeister, 1981).

Richard Scheerenberger (1983) recently completed an eight year study of the adaptive behavior of 1,178 mentally retarded individuals. He concluded that in the absence of unusual behavior or medical problems, severely retarded persons should not require extended care in a residential facility. This continues to be a point of professional study.

The Impact of the Courts

All of the major social problems of our time - one way or another and sooner or later - become, instead of merely political or social problems, legal and constitutional issues (Turnbull, 1975, p.52).

Litigation and the use of courts has had a

tremendous influence upon the development of services for the retarded in the United States during the past decade. Bergdorf sees the extension of legal rights to the retarded as part of a national trend in response to unequal treatment in areas of education, medicine, housing, public access, employment and institutional confinement.

Turnbull (1975) refers to the use of litigation to improve services for the retarded as a last-ditch action. "It stems from the failure to effect change by persuading legislatures and administrators to change (p. 52)." Furthermore he blames the failure of institutions as the primary reason why less restrictive forms of placement have become constitutionally required. Concerning the quality of treatment in institutions, he and Ann Turnbull write: "Living conditions are so deplorable that they raise questions of whether the Eighth Amendment prohibiting cruel and unusual punishment has been violated (Turnbull and Turnbull, 1975, p. 20)."

The impact of the courts concerning services to the retarded is immeasurable. Bergdorf (1980) estimates that in 1980 two-thirds of the states in this country were actively involved in litigation regarding the rights of the retarded in institutions. Turnbull (1975) writes the following:

Litigation has led (not by itself, but it has been a primary cause) to an emphasis on deinstitutionalization, the development of accreditation standards, the creation and improvement of community programs such as developmental day care centers and group homes, and an awareness of other rights of the retarded in such areas as education, sterilization, sexual expression, guardianship, incompetency, commitment and voting (p. 45).

Wyatt v. Stickney (1972) is recognized as the first major law suit on behalf of institutionalized retarded citizens of this country. Cavalier and McCarver (1981) consider it a landmark case because it established the first constitutional standards for the care and treatment of mentally retarded people in institutions. For the first time a United States Court clearly stated that the Fourteenth Amendment of the Constitution guarantees the retarded a due process right to individualized treatment in the least restrictive environment possible (Wyatt v. Stickney, 1972).

Wyatt v. Stickney concerned the unacceptable living conditions for the retarded at Partlow State School in Tuscaloosa, Alabama. This federal court decision, however, had significant implications for every public residential facility for the retarded in the country. It was the first decision to dictate specific standards for the operation of public institutions for the retarded. The forty-nine standards included in this decision addressed staffing ratios, mandatory individualized

treatment plans reviewed at least annually by trained interdisciplinary teams, post institution plans for each resident and stringent admission policies guarding against inappropriate future admissions (Wyatt v. Stickney, 1972).

The Wyatt v. Stickney decision was clearly a major step toward institutional reform. By 1979, 174 other court cases throughout the country had relied upon it for precedent regarding the right to treatment and related issues. Several of these additional cases had personal implications for Superintendents of public residential facilities for the retarded.

Youngberg v. Romeo (1982) found that the Superintendent could be held personally liable for failure to protect the constitutional rights of each resident of the facility. State budgetary constraints could not serve as an excuse. In another case, the Superintendent of Glenwood State Hospital-School in Iowa was one of several defendants against whom personal monetary damages totaling \$760,165 were ordered as a result of medical malpractice involving the use of tranquilizers (Cites V. Iowa, 1982).

Clearly litigation and the use of courts has been a major force in the deinstitutionalization movement in the United States during the past decade. Turnbull (1975) predicts that this pattern will continue.

Statistical Trends

Services to the retarded in the United States are currently in a period of significant change. The forces of public policy, professional opinion and the courts have contributed to an evolution of services away from custodial care in institutions toward active treatment in community based living alternatives. Certain statistical trends support this observation.

Herbert J. Cohen states the following:

The trend toward community care, with the integration of handicapped mentally retarded children and adults into community life, continues unabated in the United States. The trend has not been without periods of acceleration and slowing and alternative periods of retrenchment. Nevertheless, there appear to be strong moral and economic reasons, and substantial political support, for reduced use of congregate care facilities for institutional care for the retarded and increased interest in helping families maintain their retarded relatives at home and/or in the community (p.458).

In a recent review of the published, demographic literature regarding residential care for the retarded, Gary Sluyter (1984) made the following observations:

1. Both the population and median size of public residential facilities are continuing to decrease, along with a concomitant increase in alternative residential services.
2. The residential population of public residential facilities continues more and more to be composed of persons at the severe and profound range of retardation.

3. Community based residential facilities have enjoyed a rapid growth over the past ten years.
4. Even with these trends, there remains a danger of release to inadequate, sometimes more restrictive environments.
5. There is some evidence that readmissions to public residential facilities for the retarded from community facilities are increasing, indicating that such alternatives may not always be appropriate or stable (p. 23).

From 1848 to 1967 the use of public residential facilities for the care and treatment of the retarded grew steadily in the United States. The year 1967 is generally recognized as the peak of this movement, with a steady trend downward since that time (Lerman, 1981). Although there was no comprehensive method to report and assemble data during most of this period of time, the following table reflects the historic growth in the use of institutions for the retarded as researched and reported by the President's Committee on Mental Retardation (1977):

TABLE 2.1

Population in Public Residential Facilities
1848 - 1967

<u>Year</u>	<u>Total Population</u>
1848	10
1900	7,000
1925	40,000
1950	128,000
1967	193,000

Since 1967 this country has experienced a very steady reduction in the number of mentally retarded persons cared for in public residential facilities. For the period of 1970 through 1982, when the last comprehensive statistics were released, the average daily population of public residential facilities for the retarded was reduced by 70,211 individuals. This represents a reduction of 37 % during this period of time. The following table which shows the average daily population of public residential facilities as reported by Scheerenberger (1982) reflects this trend:

TABLE 2.2

Population in Public Residential Facilities
1970 - 1982

<u>Fiscal Year</u>	<u>Average Daily Population</u>
1970 - 1971	189,546
1972 - 1973	173,775
1973 - 1974	166,247
1975 - 1976	153,584
1977 - 1978	151,112
1978 - 1979	139,410
1980 - 1981	125,799
1981 - 1982	119,335

This trend is also supported by studies which attempt to identify the number of community based

residences and the number of mentally retarded persons who are cared for in them. Although admittedly difficult to identify all community homes throughout the country, Bruininks (1979) estimated that there was a seven-fold increase in the number of community residences between 1970 and 1977. In a more recent study, Janicki, Mayeda and Epple (1983) report a rate of growth of over 900 % during the past ten years. Braddock (1981) also observes that a variety of community residences for the retarded have been established at an ever increasing rate.

Three studies conducted during the past twelve years attempt to identify and report on the total number of community residences serving the retarded in the United States. Although the methodology employed in each study differs, the findings of these three studies show a high rate of growth of these services to the retarded.

Between 1972 and 1974, O'Connor (1976) identified 611 community residential facilities serving mentally retarded persons throughout the country. In 1977, Bruininks, Hauber and Kudla (1979) identified 4,427 community residences and in 1982 Janicki, Mayeda and Epple (1983) identified 6,302 homes. Although strict comparison of these studies is ill advised because of differences in definition and methodology, the rate of growth of community residences for the retarded is irrefutable.

Organizational Change

Services to the retarded in the United States are undergoing a period of significant change. Dramatic change in any organization is difficult and disruptive to the employees. Changing residential services for the retarded from an institutional based system to one of community based treatment is a challenge for anyone in a position of leadership.

Changing long term residential institutions is probably the most difficult management problem in America today. And changing residential institutions for the mentally retarded is probably more complex than changing most other types of institutions (Merges, 1982, p.1).

The difficulty encountered in the management of organizational change has long been recognized. In the 16th century, Machiavelli wrote that "there is nothing more difficult to carry out, nor more doubtful of success, nor more dangerous to handle than to initiate a new order of things (Graham, 1975, p. 379)." Experts in the field of management still identify it as a major challenge today (Drucker, 1977). Hodge and Johnson (1970) refer to the successful management of change as "the key responsibility of top level executive talent (p. 433)."

One of the reasons why the management of change is seen as difficult is explained by the reaction which most people have to change itself. Human resistance to change

is well recognized and an administrative concern to any organization undergoing change. Kotter (1979) states that "while managers may encounter many potential problems while initiating a planned organizational change, the one that seems to emerge most often is related to human resistance (p. 379)."

Resistance to change is explained differently across academic disciplines. For example, psychologists focus upon the basic personality structure. Their research explains the overwhelming need people of all ages have to maintain a feeling of security. Maintaining a sense of orderliness promotes a feeling of security; people instinctively resist external forces which will change that orderliness (Kimbler & Garnezy, 1963).

Social psychologists explain resistance to change as a learned behavior. Man has been taught and conditioned to react this way as a means of protecting himself and his social unit. Change in the natural order of things is controlled and minimized as a result (Brown, 1965).

Two rural sociologists, Beal and Bohlen (1957) report on situations in which the people involved most often and most vigorously resist change. Situations which frequently result in strong resistance are those in which the person's own position is threatened. This should be a concern to any organization experiencing significant change.

The Role of the Superintendent

Each public residential facility for the retarded in the United States is under the administrative direction of a Superintendent or, in a few instances, a Director. In all cases this individual has total administrative responsibility for operation of the facility and all programs sponsored by it. The Superintendent reports to a Commissioner or some other state official responsible for services to the retarded throughout the state. In 1982 there were 274 Superintendents of public residential facilities for the retarded in the United States (NASPRFMR, 1982).

As residential services for the retarded continue to move away from an institutional based system toward one of community based care, the Superintendent occupies a unique role. Dramatic changes have occurred within their facilities over the past two decades. This trend appears certain to continue (Roos, 1978). Sluyter, Cleland and Walker (1982) state it clearly:

It would appear, in view of a tight budgetary environment, personnel issues, litigation, external standards, advocacy, and trends in deinstitutionalization, that the role of the Superintendent is more demanding than ever (p. 5).

In 1971 Kunz (1971) collected data from 111 Superintendents of public residential facilities for the

retarded concerning the major problems faced by the Superintendent. In 1981, Sluyter, Cleland and Walker (1982) collected similar data from 203 Superintendents. The Superintendents who participated in the 1981 study identify litigation and legal activity as a major problem which they face, while it was not reported as a problem in the 1971 study. Sluyter, Cleland and Walker (1982) state:

The climate over the past decade since Wyatt v. Stickney certainly has been one of strong judicial intervention into executive prerogative and this trend appears to be very much on the mind of the respondents (p. 5).

Turnbull (1975) concurs with this observation. He states that "it is important for professionals in mental retardation to realize, if they do not already, that much of their time and effort in the next several years will be directed toward responding to litigation that demands institutional change (p. 52)." Albert J. Shafter (1981), a former Superintendent of a public residential facility for the retarded, writes about the evolution of services to the retarded during the past thirty years and vividly describes the demands and constraints simultaneously placed upon the Superintendent.

David E. Loberg (1982) believes that many forces are demanding a higher level of performance from Superintendents because of the increased awareness of the

vulnerability of the clients. He describes the dilemma inherent in the role of Superintendent as follows:

The dilemma for the Superintendent, it seems to me, is the complex skill requirements: managerial, political, professional, and inspirational coupled with an inordinate level of public trust, infrequent opportunities for both positive and negative feedback following role performances, and relatively restricted policy choices in the context of routinely exaggerated perceptions by others of the power of the office. This analysis leaves until last the chronic problem of inadequate or inappropriate resources and would not be complete without reference to the relatively short average tenure: 2 - 8 years (p. 2).

Summary

In this chapter, the researcher has presented a review of pertinent literature in order to provide a sense of perspective through which this study can be seen. The literature presented suggests several points.

Services for the retarded in the United States gradually evolved into a program which relied heavily upon public residential facilities as the backbone of the service delivery system. During the past two decades this trend has been reversed as institution populations decline dramatically and the number of mentally retarded people cared for in alternative community based housing increases simultaneously. Review of the literature presented in this chapter reveals how this reversal has been facilitated by contemporary public policy, critical

professional opinion and the use of the courts by advocates for the retarded.

Organizational change is complex and made difficult by human resistance to change. The reversal in use of public residential facilities for the retarded in this country has placed the role of the Superintendent in a unique position. The Superintendent is being asked to play a leadership role in a public process which is reducing or eliminating the facility for which he is responsible and replacing it with an entirely different concept of community based care. This is seen by many as a basic dilemma in the role of Superintendent.

The purpose of this study is to survey perceptions of Superintendents of public residential facilities for the retarded in the United States regarding various aspects of their role during a period of significant philosophical and programmatic change. The literature reviewed and discussed in this chapter serves as a basis for this study.

C H A P T E R I I I

THE DESIGN OF THE STUDY

Introduction

This chapter offers a detailed description of the design of the study, including the researcher's rationale explaining it. This chapter will also contain references to the relevant literature which support the design of the study.

The general purpose of this study was to survey perceptions of Superintendents of public residential facilities for the retarded in the United States regarding various aspects of their role during a period of significant philosophical and programmatic change.

The study consisted of two parts. The first was a case study of three Superintendents of public residential facilities for the retarded in which specific role issues of importance to these individuals were identified and recorded. The second was a survey of all Superintendents in the United States based upon the data generated through the case study. This chapter will describe the methodology used and the literature which supports it.

Combining Qualitative and Quantitative Methods

This study combined qualitative and quantitative research methodologies. The case study of three Superintendents of public residential facilities for the retarded utilizes qualitative methods. The national survey of all Superintendents in the United States utilizes both qualitative methods with five (5) open-ended opinion questions and quantitative methods with thirty-two questions which use a Likert-type scale for response choices. The conclusions of this study rely upon data provided through both methodologies.

Considerable debate exists in the field regarding the relative superiority of one or the other of these approaches. Although the researcher wishes to acknowledge the existence of this controversy, it shall not be addressed in this study. This study seeks to combine aspects of each approach for the purpose of strengthening the validity of the conclusions reached.

The literature supports a research design which combines methodologies. Cook and Reichardt (1979) state their position very clearly:

There would seem to be, then, no reason to choose between qualitative and quantitative methods. Evaluators would be wise to use whatever methods are best suited to their research needs, regardless of the method's traditional affiliation. If that should call for a combination of qualitative and quantitative methods, then so be it (p. 19).

There are others who address the value of a combined methodological approach to research. Trow (1957) has supported this position for over two decades. Sam Sieber (1982) speaks about the advantages of using integrated techniques as being multi-faceted:

The integration of research techniques within a single project opens up enormous opportunities for mutual advantages in each of three major phases - design, data collection and analyses. These mutual benefits are not merely quantitative . . . but qualitative as well (p. 177).

Seiber identifies other advantages which result from combining qualitative and quantitative methodologies in a project. He states that a questionnaire based on qualitative data is definitely improved and the non-returns of mailed questionnaires is reduced. (Seiber, 1982, p. 180) He explains more fully: (Seiber, 1979)

Field methods can serve as a background to a survey by providing familiarity with the setting being surveyed, by developing rapport with those being surveyed, and by performing exploratory work that is necessary for pretesting a survey (p. 92).

Lofland (1971) concurs with the complimentary relationship which exists between the methodologies. According to him, "quantitative studies serve primarily to firm up and modify knowledge gained in a fundamentally qualitative fashion (p.76)."

Thomas Cook (1979) clearly outlines the reasons why use of the most appropriate tools available in research will result in using a combination of qualitative and

quantitative methods:

1. Evaluations usually have multi-purposes; multi methods are appropriate.
- 2 When used together for the same purpose, the two method-types can build upon each other to offer insight that neither one alone could provide.
- 3 All methods have biases. Using both, each can check on and learn from the other (p. 21).

Potential shortcomings and barriers were considered in making the decision to combine research methodologies in this study. Cook (1979) indicates that using both methods can be expensive and take considerable time for the researcher. He is also concerned that use of combined methods requires the researcher to be skilled in both fields. These were significant concerns to the researcher.

In considering the nature, scope and purpose of this study, however, the need to use a combination of methods became very clear to the researcher. It would have been a serious error to distribute a national survey without basing the content of that survey in the real world made available through case study content analysis. Trow (1957) makes this point succinctly when he says "the problem under investigation properly dictates the methods of investigation (p.33)."

Denzin (1970) summarizes the factors involved in making the decision concerning the research methods to be

used in a study as follows:

The issue resolves largely into the personal preferences of the [researcher], the intent of the investigation, the available resources, and the [researcher's] decision concerning what 'type of interaction' he desires (p. 132).

Qualitative Methodology

At the time of this study, there were two hundred and seventy-four Superintendents of public residential facilities in the United States. Because of the limits of this study, it was not possible to interview each of these individuals concerning their perception of their role. It was necessary to rely upon a questionnaire for this purpose.

The use of a questionnaire to be mailed in a national survey is a potential risk to the ultimate outcome of the study. Questionnaires concerning a wide range of topics have become so common that they are frequently ignored by potential respondents. "The student's major problem in doing a questionnaire survey is to get a sufficient percentage of responses to use as a basis for drawing general conclusions (Borg & Gall, 1979, p. 302)."

For this reason, the design and content of the questionnaire to be administered to Superintendents throughout the country was critical to the ultimate outcome

of this study. It was imperative that the target population to be studied recognize the role issues identified in the questionnaire as accurate and significant. Failure to accomplish this would adversely affect the number of responses and consequently weaken the validity of the results.

A case study of three Superintendents of public residential facilities for the retarded was conducted for the purpose of identifying the specific role issues of importance to these individuals to be included in the national questionnaire. Use of this form of qualitative research significantly increased the probability that the role issues identified in the questionnaire would be recognized as accurate and significant by Superintendents throughout the country.

One of the main styles of social research used by empirically oriented social scientists is field research; a style of investigation that is also referred to as 'fieldwork', 'qualitative method', 'interpretative research', 'case study method', and 'ethnography' (Burgess, 1982, p.1).

"Qualitative methodologies refer to research procedures which produce descriptive data: people's own written or spoken words and observable behavior (Bogdan & Taylor, 1975, p.4)." The three most frequently used forms of qualitative methodology include participant observation, analysis of personal documents and case study collected through interviewing (Bogdan & Taylor, 1975).

The use of qualitative methodology enabled the researcher to identify and define the role issues of significance to Superintendents throughout the country in terms provided by colleagues occupying similar positions. The literature supports the value of this approach. According to Patton (1980):

Qualitative data consists of detailed descriptions of situations, events, people, interactions; direct quotations from people about their experiences, attitudes, beliefs and thoughts. . . The detailed descriptions, direct quotations and case documentation of qualitative measurement are the raw data of the empirical world (p. 22).

Lofland (1971) supports the use of qualitative methods in research attempting to identify and study issues through the perspective of the individuals in the situation being studied:

The strong suit of the qualitative researcher is his ability to provide an orderly presentation of rich, descriptive detail. He can move close to a social setting and bring back an accurate picture of patterns and phenomenological reality as they are really experienced by human beings in social capacities (p. 59).

Bogdan & Taylor (1975) also support this approach. The purpose of this study was to understand the role issues as seen by the Superintendents in the field. Consistent with this, they state that the ". . . [qualitative researcher] is concerned with understanding human behavior from the actor's own frame of reference (p. 2)."

There are concerns about the use of qualitative methodology which were considered by the researcher in

establishing the design of this study. Judged by some to be unscientific or subjective, the researcher was aware of possible criticism as a result. However, the nature, scope and purpose of this study demanded the use of this methodology. Use of qualitative methodology served as the foundation for the design of this study.

The Choice of Subjects

The choice of individuals to serve as participants in the case study was an important consideration.

People simply do not have an equal ability and willingness to make vivid the details and meaning of their lives. And while a good interviewer may be able to bring the best out in subjects, he or she cannot perform miracles on people who are not free with their words (Bogdan & Taylor, 1975, p. 102).

Having made the decision to use a case study of selected Superintendents as the basis of a questionnaire to be distributed nationally, careful consideration was given to the choice of individuals to take part in the case study. Not everyone who was available for this purpose would make a good choice. Others who might be excellent candidates simply might not be available. The choice of individuals to serve as participants in the case study was important to the ultimate outcome of this research project. "Research economy dictates that the respondents in an experience survey be very carefully selected (Selltitz, Jahoda, Deutsch & Cook, 1967, p. 55)."

Bogdan & Taylor (1975) offer suggestions concerning the selection of candidates:

1. It is essential that the subjects have free time to devote to the interview.
2. Ability and willingness to verbalize their past and present experiences and feelings.
3. Whether or not they are 'the kind' of people in whom you are interested.
4. Avoid the selection of a subject with whom you have a professional or otherwise special relationship (p. 102).

Selltiz et al. (1967) also describe the characteristics sought of participants in a case study. "One is looking for provocative ideas and useful insights. . . . Thus the respondents must be chosen because of the likelihood that they will offer the contributions sought (p.14)."

With these criteria in mind, two individuals were chosen to take part in the case study. They understood the nature, scope and purpose of the study, and were willing to participate. They were easily available to the researcher and could make time available for this purpose.

The first two individuals chosen as participants in the case study were Superintendents of public residential facilities for the retarded, an essential criterion in their selection. They were intelligent, insightful and able to articulate issues and concepts clearly. By all criteria concerning choice of case study participants,

they were acceptable for the purposes of this study.

The third case study participant was the researcher for this project. At the time of the case study, the researcher had been employed in excess of seven years as the Superintendent of a public residential facility for the retarded. He met the criteria established for participation in the case study.

As a Superintendent of a public residential facility for the retarded, the researcher had personal knowledge and perception of that role. As a result of his experiences, he had personal thoughts and feelings concerning the issues addressed in this study. To deny the contribution which he could make to the case study would be a disservice to the project.

Scientists are often so preoccupied with the importance of objectivity that they actively strive to maintain as great a distance as they can between themselves and the objects of their study. In the stages of research in which one is looking for ideas rather than conclusions, such objectivity may be inappropriate (Selltiz et al., 1967, p. 64).

The case study phase of this project was clearly looking for 'ideas.' Its purpose was to identify role issues of concern to selected Superintendents which would be recognized as accurate and significant by Superintendents throughout the country. Including the researcher as a participant in this phase of the project was clearly consistent with Selltiz's (1967) opinion.

A review of the investigator's own experience and a careful examination of his reactions as he attempts to 'project' himself into the situation of the subjects he is studying may be a valuable source of insights. . . . Here is a source of ideas that ought not to be neglected (p. 64).

Douglas (1976) also agrees with being part of the group under study:

Some of the best field research is done by people who are already members of the group they study. In those cases, . . . the beginning is not much of a problem and they are able far more easily to tell what mixture of methods is likely to work best (p. 36, note 5).

The literature strongly suggests that researchers using qualitative methods 'get close' to the field or persons being studied. Diesing (1971) advises the researcher to "become part of the community" (p. 144) which he is studying. Bogdan & Taylor (1975) speak about the need to be involved with the subjects in order to empathize with them "from their own frame of reference (p. 8)."

Patton (1980) makes the point as follows:

Qualitative research designs require that the evaluator get close to the people and situations being studied in order to understand the minutia of program life. . . . The strategic mandate to be holistic, inductive and naturalistic means getting close to the phenomenon under study (p. 43).

The researcher chose to be a participant in the case study on which the national questionnaire is based. This approach is consistent with the literature as reported in this chapter.

The Interview

The fundamental principle of qualitative interviewing is to provide a framework within which respondents can express their own understandings in their own terms (Patton, 1980, p. 205).

Having chosen the subjects to participate in the case study, the researcher then focused on the interviews to be conducted. In qualitative research, the researcher must approach the interview with a plan or strategy. "Whatever its merits for therapy, a genuinely non-directive interview approach is simply not appropriate for research (Whyte, 1982, p.11)." A successful interview must be planned in advance.

An interview guide was developed to facilitate the interviews with the case study participants. Patton (1980) refers to this as a checklist. The purpose of an interview guide is to make sure that the topics determined to be important are covered during the course of the interview. "The interview guide provides a framework within which the interviewer would develop questions, sequence those questions, and make decisions about which information to pursue in greater detail (Patton, 1980 p.201)."

The interview guide contained those questions which the researcher determined would effectively elicit from the participants various aspects of their perception of

their role. The content was based upon the researcher's knowledge and experience in the field as a Superintendent of a public residential facility for the retarded. It contained references to broad topics to be addressed in the interview such as:

- . . . the participant's 'feelings' about his job.
- . . . how the participant thinks he is perceived by others.
- . . . how this job may have impacted upon various aspects of his life; i.e., health, relationships with others, outlook, etc..
- . . . personal concerns or worries in the job.
- . . . sources of personal satisfaction in the job.
- . . . thoughts about his professional future.

The strategy of using a group interview for this phase of the project was considered and rejected. It was determined that personal, private interviews would enable the participants greater personal freedom of expression in exploring their perspective of various aspects of their role.

Whether or not to conduct group interviews is dependent upon the particular topic one is studying and the particular situation in which one is operating. The only suggestion here is that one should consider the strategy of group interviews (Lofland, 1971, p. 88).

The researcher chose to interview himself first. Using the interview guide, he tape recorded in narrative

style his responses to the topics outlined. He attempted to provide complete and detailed responses to the issues, simulating as much as possible a normal interview situation.

The researcher chose to interview himself first for three reasons:

1. To avoid influencing his responses by knowing in advance the responses of the other participants.
2. To pre-test the interview guide.
3. To gain added awareness of the issues to be addressed in this study.

The three interviews were tape recorded and transcribed. The literature strongly supports this approach. Patton (1980) calls it "indispensable (p. 247)." Bogdan & Taylor (1975) advise the interviewer to use a tape recorder "whenever possible" (p. 109), and Lofland (1971) states "for all intents and purposes it is imperative that one tape record . . . then one can interview (p. 89)."

If the research man records only those items whose significance is apparent to him at the time, he will lose data that could open up for him promising new avenues for exploration (Whyte, 1982, p.118).

In interviewing the other two participants, the researcher assumed the role of facilitator of the interview process. He sought to elicit opinions and feelings from the participants, encouraging them to

expound and elaborate. "For most interviewing situations, it is most productive of information for the interviewer to assume a non-argumentative, supportive and sympathetically understanding attitude (Lofland, 1971, p. 89)."

The interviews were unstructured following the established interview guide.

Basically there are two types of interviews, structured and unstructured. The structured interview consists of predetermined specific questions which are administered to the respondent in as uniform fashion as possible. . . In a non-structured interview, the interviewer is given greater freedom in the wording and sequencing of questions (Kerlinger, 1964, p.481).

Because the purpose of the interviews was to enable the participants to identify and elaborate upon their perceptions of various aspects of their role, the unstructured interview format was most appropriate. The content of the interview would be supplied by the participants. Using the interview guide, the researcher served as the facilitator of the process.

The unstructured interview, therefore, assumes the appearance of a natural, interesting conversation. But to the proficient interviewer it is always a controlled conversation which he guides and bends to the service of his research interest. . . a few comments and remarks, together with an occasional question designed to keep the subject on his main theme are the usual means by which the interviewer accomplishes his task (Palmer, 1928, p. 171).

Bogdan & Taylor (1975) support this approach which they refer to as an "open-ended interview (p. 99)." Glasser (1970) supports the use of unstructured

interviewing in situations in which new ideas are being identified and explored because the risk is minimized that "the idea may be disregarded because of pre-established rules or plain routine (p. 43)." Lofland (1971) refers to this approach as a "flexible strategy of discovery":

One such flexible strategy of discovery is termed the 'unstructured interview' or 'intensive interviewing with an interview guide'. Its object is not to elicit choices between alternative answers to pre-formed questions but, rather, to elicit from the interviewee what he considers to be important questions relative to a given topic, his descriptions of some situations being explored (p. 76).

The Analysis of Qualitative Data

The analysis of data is a creative process.

(Patton, 1980, p.299)

The interviews with the case study participants were tape recorded and transcribed. This enabled the researcher to analyze the data both by listening to the tape recording and reading the transcripts. "Transcriptions can be enormously useful in data analysis and later in replications or independent analyses of the data (Patton, 1980, p. 248)."

Data produced through the case study interviews were analyzed in order to identify the issues which the participants seemed to say were essential to be considered in studying the role perception of Superintendents of public

residential facilities for the retarded. Analysis of both the tape recordings of the interviews and their transcriptions was a time consuming and laborious process. Lofland (1971) estimates that "one should spend, at minimum, at least as much time immediately studying and analyzing the interview material as was spent in the interview itself (p. 90)." The researcher far exceeded this expectation.

There are no clear cut rules about how to proceed. The task is to do one's best to make sense out of things. A qualitative analyst returns to the data over and over again to see if constructs, categories, explanations and interpretations make sense, if they really reflect the nature of the phenomena. Creativity, intellectual rigor, perseverance, insight - these are the intangibles that go beyond the routine applications of scientific procedures (Patton, 1980, p.339).

A classification system was developed by which topics, ideas and themes which reappeared in the course of the three interviews were identified and recorded. "The purpose of classifying qualitative data in preparation for content analysis is to search for patterns and themes within a particular setting or across cases (Patton, 1980, p.302)." The frequency with which each topic appeared was recorded. Inductive analysis revealed a pattern in which identifiable issues emerged in all three interviews, although the personal opinions expressed about those topics by the participants obviously differed.

This process produced a list of six core issues

tentatively identified in each of the interviews analyzed. Each of these issues appeared to reflect that which the participants had indicated were the significant issues to address in a study of role perceptions of Superintendents of public residential facilities for the retarded. The pattern identified in each of the interviews showed these six core issues as important to the participants.

The six core issues tentatively identified were then used as a basis to develop a number of questions. Each question was intended to address a single or multiple aspects of a core issue. The group of questions was intended to amplify and extend the core issues. Ultimately the questions would comprise the questionnaire to be administered to Superintendents of public residential facilities for the retarded throughout the United States.

The six core issues and the questions were presented in writing in a group meeting of the participants of the case study. The participants were asked to verify that, in fact, each of these represented what they thought were significant issues concerning the role perception of Superintendents.

The best and most stringent test of observer constructs is their recognizability to the participants. When participants themselves say, 'yes that is there. I'd simply never noticed it before', the observer can be reasonably confident that he has tapped into extant patterns of participation (Lofland, 1971, p.34).

Based upon this dialogue with the participants, the

written statements of the core issues and questions were modified. A second meeting of the participants confirmed that the modified statements in fact accurately represented significant issues to be addressed in studying the role perception of Superintendents of public residential facilities for the retarded. This, therefore, was the basis of the questionnaire to be administered nationally.

Quantitative Methodology

The questionnaire used in this study consisted of two parts. One contained thirty-two (32) statements for which the participants were asked to record their agreement or disagreement according to a five point Likert-type scale. The second consisted of five open ended questions which solicited the participant's written statements regarding various aspects of their perception of their role.

"Quantitative measurement relies upon the use of instruments that provide a standardized framework in order to limit data collection to certain predetermined response or analysis categories (Patton, 1980, p.22)." The thirty-two questions in this questionnaire which used a Likert-type scale is a form of quantitative methodology.

"The type of summated scale most frequently used in the study of social attitudes follows the pattern devised

by Likert (1932) and is referred to as a Likert-type scale (Selltiz et al., 1967, p.366)." Severy (1974) agrees with its frequent use in contemporary research. According to him, "Likert's scale appears to be the most popular in present research (Severy, 1974, p.5)." Use of a Likert-type scale for this phase of this study was clearly appropriate.

The Likert scale is constructed by formulating a series of opinion statements about some issue. Each subject's attitude is measured by asking him to indicate the extent of his agreement or disagreement with each statement. Procedurally, this is accomplished by providing each subject with a multi-pointed scale of response, ranging from strong favorableness to strong unfavorableness.

(Severy, 1974, p.5)

Five Superintendents of public residential facilities for the retarded were chosen to pretest the questionnaire to be administered nationally. None of these individuals had served as participants in the case study which formed the basis of the questionnaire. They were chosen because of their availability to the researcher, their willingness to participate and the positions which they occupy as Superintendent. This is consistent with Selltiz et al. (1967) who state "the people interviewed on the pretest should be similar in characteristic to those who will be interviewed in the final study (p. 551)."

Borg and Gall (1979) agree with the importance of pretesting the questionnaire and the selection of

participants:

. . . it is very desirable to carry out a thorough pretest of your questionnaire before using it in your study. For your pretest you should select a sample of individuals from a population similar to that from which you plan to draw your research subjects (p. 301).

The pretest of the questionnaire was conducted in a group meeting with the participants. The questionnaire was administered to them and their completion time was recorded. There was no discussion during the actual administration of the instrument. Participants were asked to complete the document as they would in a real testing situation, and to mark for later discussion any questions which were unclear or ambiguous.

Upon completion of the instrument, a lengthy discussion was held with the participants. They were encouraged to discuss any questions which were unclear or difficult to answer in the testing situation, and their specific suggestions for refinement and improvement were solicited. This process was very helpful to the researcher in identifying ambiguities in the questionnaire as seen by a sample of the individuals who actually would be completing the final document. Selltitz et al. (1967) make this point as follows: "A valuable part of the pretest interview is discussion of questions with the respondents after they have answered them (p. 551)."

"Pretesting the questionnaire yields data concerning instrument deficiencies as well as suggestions for improvement (Gay, 1976, p.131)."

Comments and suggestions for improvement given by the pretest participants were considered and incorporated whenever feasible in the final design of the questionnaire. Care and attention was given to the neatness and quality of the final document produced for distribution. A professionally designed and printed cover for the questionnaire was purchased in order to enhance its appeal to potential respondents and, hopefully, increase the rate of participation. This is consistent with Borg & Gall (1979) who state:

A poorly reproduced questionnaire indicates to the respondent that the study is of little importance to you or anyone else in spite of your protestations to the contrary. . . The more expensive methods of duplication are usually worth the extra cost.
(pp. 303-304)

The questionnaire was administered in a group meeting to fifty-eight (58) Superintendents of public residential facilities throughout the country. Using a mailing list of the Superintendents in the United States recorded by the National Association of Superintendents of Public Residential Facilities for the Mentally Retarded (N.A.S.P.R.F.M.R.), it was then mailed to the two hundred and fifteen (215) Superintendents nationally who were not in attendance at the group meeting.

The data produced by this questionnaire were analyzed by two different processes. The quantitative data supplied by the thirty-two (32) questions which used a Likert-type scale for response choices were coded and keypunched for computer analysis. The Statistical Package for the Social Sciences (S.P.S.S.) program was used to perform statistical tabulations and analyses. The frequency, percent, mean and standard deviation of each element is included in this report.

Data which were produced by the five open-ended questions which solicited written statements were analyzed using the same methodology which was applied to the case study analysis. Inductive, content analysis of typed worksheets of the statements regarding each question identified themes and patterns among the data. These are highlighted and summarized in this report.

The data which were developed and analyzed according to both methodologies described in this chapter were included in determining the conclusions of this study.

Access to the Participants

It is necessary to make a final point concerning the design of this study. The issue concerns the need to ensure to the greatest extent possible that respondents in a national study are willing to participate.

"The student's major problem in doing a questionnaire survey is to get a sufficient percentage of responses to use as a basis for drawing general conclusions (Borg & Gall, 1979, p.302)." It is a very serious concern in a national study which relies upon a mailed questionnaire and voluntary participation of the target population. Countless well intended, professionally sound studies have been abandoned because of insufficient participation. This was a matter of grave concern to the researcher in considering the basic design of this study.

In order to increase the level of participation of this study, the researcher secured the endorsement and support of the National Association of Superintendents of Public Residential Facilities for the Mentally Retarded (N.A.S.P.R.F.M.R.). This group serves as the national professional association for the intended participants of this study. Securing their endorsement is consistent with Borg & Gall's (1979) point:

If possible, it is also desirable to associate your study with some professional institution or organization with which individuals in your sample might be expected to identify (p. 303).

This endorsement produced several benefits for the researcher and the ultimate outcome of this project. Among the benefits gained were:

1. The questionnaire distributed nationally was printed on N.A.S.P.R.F.M.R. stationery, increasing the probability that the intended participants would identify and review the material.
2. A letter from the President of N.A.S.P.R.F.M.R. endorsing the study as important to the concerns of their organization was attached to each questionnaire.
3. The researcher was given time at the annual national meeting of N.A.S.P.R.F.M.R. to administer the questionnaire to those Superintendents in attendance.
4. The researcher was allowed to use the computerized mailing list of N.A.S.P.R.F.M.R. containing current information regarding Superintendents of public residential facilities throughout the country to facilitate the mailing of the questionnaire.

The endorsement of N.A.S.P.R.F.M.R. of this project was an important part of the design of this study. It contributed positively to the level of participation of the respondents. As a result, the validity of the conclusions reached in this study was increased.

CHAPTER IV

THE CASE STUDY

Introduction

The first part of this study consisted of a case study of three Superintendents of public residential facilities for the retarded in which specific role issues of importance to these individuals were identified and recorded. The issues identified through this process served as the basis of the questionnaire administered to Superintendents throughout the country. In this way, the case study served as the foundation of the larger national survey of Superintendents.

In this chapter selected sections of the case study are presented and discussed. The purpose of the case study is discussed and the specific objectives of the researcher who conducted the case study are explained. This chapter relies heavily upon direct statements of the participants in the case study in order to illustrate the six core issues regarding their perception of their role which they identified.

The case study consisted of an unstructured private interview with each of the three participants. An interview guide was used in the interviews. The sessions

were tape recorded and transcribed. Inductive content analysis of the transcriptions identified the final data resulting from this case study.

Purpose of the Case Study

The purpose of this case study was to gain knowledge and insight into the perception of three Superintendents of public residential facilities for the retarded regarding various aspects of their role during a period of significant philosophical and programmatic change.

The study attempted to give the participants an opportunity to candidly reveal their personal feelings and perception of their role as Superintendent. The specific objectives of the study were as follows:

1. To increase the researcher's knowledge of the perception which Superintendents of public residential facilities for the retarded have of their role.
2. To identify and clarify the role issues which are most important to the participants.
3. To gather information and experience regarding the feasibility of carrying out expanded research of this topic in other settings.
4. To establish a basis for future research of this topic.

The Nature of the Job

One of the first and most critical areas which the researcher explored with the participants of the case study concerned the actual nature of the job as seen by the participants. An attempt was made to find out what they really thought of their jobs.

Various aspects of this issue were addressed in different forms throughout the interviews. It was an area which the participants discussed freely. It was obviously an area to which they had given much personal thought previously.

A major point which emerged frequently is that the case study participants perceive the essential nature of their job as "all consuming." They indicated that it is the kind of job you live with; you can't retreat from it and you never feel "off duty."

It's an all pervasive conscience that you feel for your agency. You have to. That's where the buck stops.

A second participant put it this way:

I think everything in my life probably does revolve around my job. . . In terms of life, I think it's (the job) all encompassing. People expect you to be available at all times, whether it's twelve o'clock at night on a Saturday or Sunday. That's part of the role. Even though someone else could be available, people just want to talk to the Superintendent.

This was a central theme which was repeated throughout the three interviews. Interestingly, there were shades of ambivalence which surrounded the participants' feelings concerning this aspect of their role. On one hand, a participant spoke with honesty and candor:

Oh, I'd love to shut it off! I'd like to just rip that phone off the wall. The only way to honestly and truly shut it off is to totally get away.

Yet another participant admitted: "What are you going to do? Do you want someone else to make those decisions for you?" There was a definite ambivalence and uncertainty when the participants implied that they wished that this burden could be lifted, but "it just can't." However, there was also a sense of pride and importance which emerged when the participants spoke of the nature of this role:

It's like being Mayor of a city. The ability to control people's lives, to help or hinder careers, to make decisions that have such a direct impact on other people's lives is awesome.

Simultaneously, there was a certain sadness, almost self-pity, which was apparent when the participants discussed this aspect of their job. One spoke with disbelief when several of his staff members told him that they wouldn't want his job for "anything in the world." Wistfully he said:

I think to myself, gee. . . these are people dragging in twelve, thirteen, maybe fourteen thousand dollars a year tops. There is no power! There is no authority! No real flexibility in what they're going to do each day. And, they wouldn't want my job? Of course, (laughing) maybe they're more intelligent than I.

Discussion with the participants focused on not having enough time to do everything; no time for reading and self-improvement; little time for families, etc.. It's bittersweet. They're thought of as essential to the institution, but "people don't have any appreciation for the workload" they face.

Two of the participants live with their families on the grounds of the facility they administer and suggested that their proximity and availability might exacerbate "this problem." One participant said that he is probably available and accessible more than he should be. Yet the feelings expressed by the Superintendent who lives off grounds are no different:

I only live a mile from the center. Sometimes I wish it was a thousand, but I really wouldn't want to be much further away.

In discussing with the participants possible reasons for this consuming sense of responsibility, two suggestions were offered. The first was based on a sense of identity which the participants expressed about themselves; "to many people you and your facility are

synonymous." There appears to be a common inability to separate the two. Discussion with the participants focused on ownership of the program, pride and integrity.

Another, and possibly greater reason why the case study participants expressed a consuming sense of responsibility in relation to their jobs appeared to be based on the nature of the clientele served by their programs. The client population of a public residential facility for the retarded is, in effect, totally dependent upon the facility in which they reside. They are unable to effectively speak for or represent themselves. The case study participants spoke about the personal pressures which they experienced as a result of the condition of the clients in their facilities. As one participant put it:

None of our clients ever asked to be placed here. But they are and we owe them something. We owe them everything we can possibly give them because no one else will do it.

At least one of the case study participants felt that he is misunderstood by outsiders. He spoke with pride, however, when he stated that he is recognized as a strong advocate for the clients of his facility.

To others in state government, I am considered to be cheerless - irascible. I think the latest word is ascerbic. I am a pain in the ass! They don't think I know how to play the game. I do! I just have a different agenda.

Organizational Change

The care and treatment of persons with mental retardation is in a period of rapid and significant change in the United States. A trend has clearly been established in which the use of large institutions to care for the retarded is being phased down and replaced by a system which relies upon community based housing for the retarded as its foundation. This raises several interesting issues regarding the role perception of the Superintendents in that process.

There is no question that all three case study participants recognize the significance of the change which is occurring as well as the critical nature of their role in the process:

I feel that I am responsible to lead the process of change at this facility; it is a function of leadership.

* * *

I guess I'd probably like to be remembered most as the individual who changed things here.

* * *

The only way to really effectuate change and to implement change, and to really have it take place when you're not here, is to do it administratively.

Yet in spite of this common recognition, the three case study participants expressed doubt about the ability to bring about real, meaningful, long-lasting change in the nature of services to the retarded. The participants indicated that institutions have a way of taking on a "life of their own." The informal network frequently becomes stronger than the formal one. One subject expressed it succinctly when he said that "institutions are basically impervious to change." He stated that this condition varies with the size of the facility and all three participants agreed that ability to change a facility is related to its size.

The three case study participants approached the process of change with very different orientations and expectations. The first, who appeared more aggressive than the other two, saw change as a function of authority; true, long-lasting change can only come from that genesis. Speaking as a named defendant in a pending class action suit to close his facility, he said:

I have one last hope for change. That is something called the trial, or perhaps I should say the judgement. This will give me the opportunity to implement the changes I think necessary.

The second participant saw "management style" as the key factor in the process of change. According to him, "teamwork is the thing that really makes this place

work." To him, the process was as important as the product. He strongly believed that participatory decision making contributes to long term change. According to this participant, "autocrats stick out like a sore thumb."

The third case study participant discussed change from a broader perspective; "the ability which anyone of us has to change our programs is limited by outside forces." According to him, public residential facilities are bound by certain margins or parameters which are established by political, social and economic forces. The role of the Superintendent is limited by those boundaries.

The third case study participant also believed that the timing of change efforts was critical:

An idea which was wrong at one time can be right at another. Watch for the signals. Invest your energy at the time when it'll produce the greatest returns. Everything can't change at once.

There was similarity among the three case study participants concerning other aspects of organizational change. One area of agreement was that it was "hazardous" and should be approached with caution. One said, "the guys who are known leaders in the field tend to be very cautious about moving ahead." Another case study participant equated the role of the change agent with high visibility and said:

I just have a concern because I think sometimes you have periods of high visibility. . . and it seems when you are highly visible as an individual or a facility, there are some people who tend to go after you, for some reason. It's not a paranoia, but it's something that happens; whether it's the news media, or whether it's people who don't agree with what you're doing?

Another aspect of change which the case study participants shared was the element of frustration. According to all three, change rarely goes as planned. Although probably an exaggeration, the point was nevertheless well made through several examples and anecdotes offered by the participants. One said it dramatically:

When you're in the trenches trying to make something new work, where you haven't planned everything and you can't because we are in an inexact science. . . you shape it, you mold it, you retreat, you retrench. It's damn difficult and frustrating.

Another subject which the case study participants discussed was the external constraints which are placed upon their attempts to bring about change in their programs. One participant cryptically challenged all Superintendents to ask themselves who really is in charge; "who really runs your facility?" All three participants indicated that there is not a great deal of support in state government for what they're trying to do. One said that change takes place "in spite of the system" while another said that "there are a lot of people out there

who are stumbling blocks." The following illustrates this perspective of the case study participants:

The number of external constraints placed upon us has increased geometrically as the amount of internal control has receded. The most profound frustration is to see the mission of this facility left in some respects to the happenstance of union contracts and to policies that are applied from external sources.

* * *

We are supposed to make changes but we aren't given the authority to do so.

* * *

Don't hamstring me! Don't handcuff me! Don't castrate me and then ask how come this is happening! It's almost as though they elevate my salary to tell me to shut up, enjoy the dollars and be content.

Impact Upon The Individual

One of the major content areas of the case study was the impact which the job of Superintendent has had upon each of the case study participants. According to them, management of a public residential facility for the retarded is not a nine to five job; "it becomes a lifestyle."

All three of the case study participants claimed to have invested a high degree of physical and emotional

energy into their jobs. What impact did it have on the individuals? It varied:

The overall impact which the job has had upon me as an individual? . . . I still get a good feeling from it, but it's getting harder.

* * *

You've got to feel guilty when you're the chief executive officer of an institution which, by many definitions, is an acronym. It has outlived its usefulness for most of the people who live in it. I think most Superintendents who are really honest would say that. . . I am in a situation where I am trying to decrease the importance of my own agency. How the hell can you feel good about that?

* * *

There is no question that this job has changed my perception of life, probably more so than I realize. Your sense of perspective is changed. . . It has to!

In spite of what they perceived as a tremendous personal investment in the job, the case study participants also spoke about a high personal return from the job as well. They said that they put a lot into their job, but they get a lot out of it in return. Each seemed to indicate that this was acceptable for now, but the balance probably won't last forever.

All three case study participants were comparatively young men, and all showed concern about their personal future. One said it bluntly:

I do feel that there is no question that my tenure here has shortened my life to some degree.

A second case study participant elaborated on this theme when he said:

I have a great concern for my future. I don't know what I am going to do for the next twenty years. I am taking it one year at a time, and I realize how that can be. Everyone knows the Superintendents' tenure nationwide. It's very insecure. In fact I've been here seven years and that makes me an old man in the national perspective of things.

The same point was made by the third case study participant when he said:

It's virtually inconceivable that I'll spend the rest of my professional career in this job, or one like it. It takes too much out of me. There will come a point when I'll just have to leave.

The three participants in this case study expressed a need to cope with the personal tensions which the job of Superintendent creates. Each of them, however, has developed a different way to accomplish this. One uses physical activity and sports as a means to release the tension of the job. The second participant invests himself in activities with his family as a retreat. The third has experimented with different ways to cope with the tension and most times simply "drops out of sight" for a few days to regenerate his capacity. The point is not how each of these individuals copes with the tension;

the point is that the job creates extraordinary tension for each of them and each has had to consciously develop a strategy to deal with it.

The impact which the job of Superintendent has had upon each of them was on the minds of the case study participants. One felt that he has become less sensitive to others:

I've had to develop a thick skin. I don't like it, but I've had to in order to survive.

Another case study participant felt that the job has resulted in more distance between himself and other people:

I am a gregarious person. I like nothing better than to go to a party, a group at a bar, and start telling stories; trading witicisms. I did a fair amount of that my first two years here, but not anymore. I tend to be involved in a lot more solitary pursuits and avoid large groups.

The issue of the distance which the job of Superintendent puts between the person and others is one which the case study participants recognized and spoke about freely. Although each has a large staff assigned to his agency and interacts with a countless number of individuals daily, each said he felt isolated in his job. One of the case study participants spoke about his sense of isolation in the following way.

I don't think any chief executive officer of a large facility is understood by anyone. If they're lucky, maybe their wife or kids. They can't understand me. They don't know the degree of anxiety I experience. They don't know the degree of forbearance I have to exercise.

The distance from others which the case study participants said is part of the job adds to some degree of misunderstanding which they felt exists about themselves. Personal attacks, whether by media, staff or families of residents, hurt! One participant spoke about getting blamed personally for things he didn't even know existed. Another said, with some humor, that he wished he was as all powerful, controlling and pervasive as people think he is. "Not everything that goes wrong is my fault."

All three of the case study participants spoke about their fear of "burning out" in the job. One, however, spoke at length about his personal fear of not even recognizing the signs:

I guess my biggest concern would be becoming complacent, burning out, and not even knowing it. How do you know when it happens?

He said that he has said to his close associates:

At some point when I am just a burned out Superintendent, a burned out shell of a man, would you be the first to come and tell me that? Don't let me be the last to know. At that point I would hope I'd be able to pack it in. I hope I am not so much locked into the system and too comfortable to call it quits.

Ambivalence toward the job frequently emerged in discussions with the case study participants. It is probably best summed in the following statement by one of the participants:

It has been worse than I ever could have imagined in some respects and better than I ever could have hoped for in others.

Conclusions

Based upon the data presented in this case study, the following are the core issues which are of significance to the three participants of this case study concerning their perception of their role as Superintendent of a public residential facility for the mentally retarded:

1. Factors which sustain a person in the role of Superintendent.
2. Improvement of programs for the retarded.
3. Ability to perform the roles expected of a Superintendent.
4. The nature of the job.
5. Impact of the job upon the individual.
6. Sense of isolation in the job of Superintendent.

Summary

The questionnaire which was distributed nationally to all Superintendents of public residential facilities for the retarded as part of this study was based upon a case study of three Superintendents. In this chapter, selected sections of the case study were presented and discussed.

The three participants in the case study identified six core issues of significance to them concerning their perception of their role as Superintendent. These six core issues served as the foundation for the larger national survey of Superintendents.

C H A P T E R V

PRESENTATION OF THE QUANTITATIVE DATA

Introduction

Data collected from the questionnaire administered to all Superintendents of public residential facilities for the retarded in the United States are presented and discussed in this chapter. The chapter is organized in three major sections as follows:

1. Descriptive Characteristics of the Participants.
2. The Survey Data.
3. Analysis and Discussion of Data.

The questionnaire was administered during the months of February and March in 1983. At that time, there were two-hundred and seventy-four (274) Superintendents of public residential facilities for the retarded in the United States recorded by the National Association of Superintendents of Public Residential Facilities for the Mentally Retarded. (NASPREMR) One-hundred and ninety-six (196) members of the group participated in this study, representing seventy-one and one-half percent (71.5 %) of the total. The significant characteristics of those who participated in this study follow.

Descriptive Characteristics of the Participants

TABLE 5.1

Sex of the Participants

	<u>Number</u>	<u>Percent</u>
Male	173	88.3 %
Female	20	10.2 %
No Response	3	1.5 %
Total	196	100.0 %

TABLE 5.2

Age of the Participants

<u>Years</u>	<u>Number</u>	<u>Percent</u>	<u>Years</u>	<u>Number</u>	<u>Percent</u>
Under 30	2	1.0%	51 - 55	33	16.8%
31 - 35	17	8.7%	56 - 60	21	10.7%
36 - 40	47	24.0%	61 - 65	6	3.1%
41 - 45	33	16.8%	66 - 70	2	1.0%
46 - 50	27	13.8%	No Response	8	4.1%
			Total	196	100.0%

TABLE 5.3Education of the Participants

<u>Degree</u>	<u>Number</u>	<u>Percent</u>	<u>Degree</u>	<u>Number</u>	<u>Percent</u>
No Degree	2	1.0%	Ph.D	45	23.0%
Bachelor	14	7.0%	Ed.D	15	7.7%
One Master	108	55.1%	M.D.	6	3.1%
Two Masters	3	1.5%	No Response	3	1.5%
			Total	196	100.0%

TABLE 5.4Salary of the Participants

<u>Salary</u>	<u>Number</u>	<u>Percent</u>
Under - \$25,000	2	1.0%
\$25,000 - \$30,000	12	6.1%
\$31,000 - \$35,000	19	9.7%
\$36,000 - \$40,000	34	17.3%
\$41,000 - \$45,000	39	19.9%
\$46,000 - \$50,000	39	19.9%
\$51,000 - \$55,000	22	11.2%
\$56,000 - \$60,000	22	11.2%
\$61,000 - \$65,000	3	1.5%
\$66,000 - \$70,000	1	0.5%
\$71,000 - \$75,000	1	0.5%
No Response	2	1.0%
Total	196	100.0%

TABLE 5.5

<u>Number of Years in Present Position</u>					
<u>Years</u>	<u>Total</u>	<u>Percent</u>	<u>Years</u>	<u>Total</u>	<u>Percent</u>
0 - 5	111	56.6%	21 - 25	3	1.5%
6 - 10	51	26.1%	26 - 30	1	0.5%
11 - 15	18	9.2%	31 - 35	2	1.0%
16 - 20	8	4.1%	No Response	2	1.0%
			Total	196	100.0%

Note: Fifty (50) participants have served as Superintendent of another facility previous to their present position.

TABLE 5.6

<u>Number of Staff</u>			
<u>Total Staff</u>	<u>Number</u>	<u>Percent</u>	
Under 100	11	5.6%	
101 - 150	28	14.3%	
251 - 500	31	15.9%	
501 - 750	29	14.9%	
751 - 1000	31	15.9%	
1001 - 1250	25	12.7%	
Over 1250	30	15.1%	
No Response	11	5.6%	
Total	196	100.0%	

Note: The combined total staff of the participants is approximately 146,400 employees.

TABLE 5.7

<u>Number of Clients Who Live on Campus</u>		
<u>Total Clients</u>	<u>Number</u>	<u>Percent</u>
Under 100	28	14.3%
100 - 250	38	19.4%
251 - 500	60	30.6%
501 - 750	33	17.0%
751 - 1000	16	8.2%
1001 - 1250	10	5.0%
Over 1250	7	3.5%
No Response	4	2.0%
Total	196	100.0%

Note: The participants are responsible for approximately 95,550 residents of campus facilities.

TABLE 5.8Number of Clients Who Live in Community Residences

<u>Total Clients</u>	<u>Number</u>	<u>Percent</u>
Zero Clients	98	50.0%
Under 100	37	18.9%
101 - 250	25	12.9%
251 - 500	18	9.2%
501 - 1000	11	3.5%
Total	196	100.0%

Note: The participants are responsible for approximately 27,000 residents of community facilities.

TABLE 5.9Current Budget of the Participants

<u>Total Budget</u>	<u>Number</u>	<u>Percent</u>
Under \$5. .million	42	21.5%
\$6 - \$10 .million	28	14.4%
\$11 - \$15 .million	39	20.0%
\$16 - \$20 .million	29	15.0%
\$21 - \$25 .million	21	10.7%
\$26 - \$30 .million	11	5.4%
\$31 - \$35 .million	6	3.0%
\$36 - \$40 .million	3	1.5%
\$41 - \$45 .million	4	2.0%
\$46 - \$50 .million	3	1.5%
Over \$50 .million	2	1.0%
No Response	8	4.0%
Total	196	100.0%

Note: The combined total budgets of the participants is approximately \$2,949,000,000.

Profile of the Participants

Based upon the preceding tables describing the characteristics of the individuals who participated in this study, it is possible to develop a profile of this group. The purpose of this profile is to give the reader a more intimate sense of the majority of Superintendents who supplied the data for this study.

The sex of the participants is clearly male; 173 (88.3 %) are men while 20 (10.2 %) are women. The largest number of participants are between the ages of 36 to 45, with 80 (40.8 %) of the 188 individuals who answered this question fitting in this group. There are 60 (30.6 %) participants between the ages of 46 and 55, and only 8 (4.1 %) above the age of 60.

Concerning their level of education, 108 (55.1%) have a Masters Degree. Sixty-six (33.8 %) of the participants have a Doctorate Degree. Seventy-eight (39.8 %) members of the group earn between \$41,000 and \$50,000 annually with 67 (34.1 %) persons earning less than this amount and 49 (24.9 %) earning more.

Most participants in this study have held their present jobs for less than five years. One hundred and eleven (56.6 %) persons meet this criterion while 162 (72.7 %) have been in their present jobs for less than ten years. Fifty (25.5 %) participants have served as

Superintendent of another facility previous to their present position.

The number of staff supervised by the participants is fairly equally distributed with 11 (5.6 %) having fewer than 100 staff and 5 (2.5 %) supervising in excess of 2,000. As a group, the participants of this study are responsible for supervision of 146,400 staff members.

The participants are also responsible for approximately 95,550 mentally retarded residents of the campus facilities they operate. Sixty (30.6 %) of these facilities have between 251 and 500 residents, making this the largest group in the study. Thirty-eight (19.4 %) of the group have between 100 and 250 campus residents, while 33 (17.0 %) have between 501 and 750 residents.

Ninety-eight (50.0 %) of the participants do not have responsibility for mentally retarded clients who live in community residences. The remaining members of the group are responsible for approximately 27,000 mentally retarded residents of community facilities. Thirty-seven (18.9 %) have responsibility for less than 100 community residents while an additional 25 (12.9 %) have fewer than 250 mentally retarded residents of community facilities.

The combined total budgets of the participants of this study is approximately \$2,949,000,000. Seventy (35.9 %) of the group have budgets under ten million dollars while 68 (35 %) have budgets between ten and

twenty million dollars.

The Survey Data

The survey instrument consisted of two sections: the first contained thirty-two (32) questions for which the participants were asked to indicate their agreement or disagreement according to a Likert scale; the second section consisted of five (5) open-ended questions for which they were asked to write their personal opinions. Responses to the thirty-two (32) Likert questions are reported in this section. Responses to the open-ended questions will be reported separately in Chapter VI.

The thirty-two (32) questions to be reported in this section focus upon six (6) different core issues which were identified in the case study reported in Chapter IV of this report. This section will present each core issue and the data which relate to it. The core issues and the sequence of data to be reported are as follows:

1. Factors which sustain a person in the role of Superintendent.
2. Improvement of programs for the retarded.
3. Ability to perform the roles expected of a Superintendent.
4. The nature of the job.
5. Impact of the job upon the individual.
6. Sense of isolation in the job of Superintendent.

Factors Which Sustain a Person
in the Role of Superintendent

The study contained six (6) questions which focused on this core issue. Tables 5.10 through 5.15 which follow contain data supplied by the participants in response to these questions. Questions addressed in the following pages are:

Table 5.10 The feeling that my work is important to the lives of our clients reinforces me more than any other factor in this job.

Table 5.11 I feel a strong sense of personal responsibility for the well-being of our clients.

Table 5.12 Although I have multiple roles I see myself first as an advocate for the clients.

Table 5.13 The salary associated with this job is a major reason for staying.

Table 5.14 I am generally proud of the facility I administer.

Table 5.15 I basically like my job and want to continue in it.

TABLE 5.10

Question: The feeling that my work is important to the lives of our clients reinforces me more than any other factor in this job.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	73	37.2%	. .}	180	91.8%
Agree	107	54.6%	. .}		
Undecided	11	5.6%	. .}	11	5.6%
Disagree	5	2.6%	. .}	5	2.6%
Strongly Disagree.	- -	- -	. .}		
No Response . . .	- -		. .}	- -	- -

Statistical Analysis

Mean 4.265

Standard Deviation . . .680

TABLE 5.11

Question: I feel a strong sense of personal responsibility for the well-being of our clients.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	118	60.2%	. .}	195	99.5%
Agree	77	39.3%	. .}		
Undecided	- -	- -	. .}	- -	- -
Disagree	- -	- -	. .}	- -	- -
Strongly Disagree.	- -	- -	. .}		
No Response . . .	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 4.582

Standard Deviation . . .589

TABLE 5.12

Question: Although I have multiple roles I see myself first as an advocate for the clients.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	73	37.2%	. .}	176	89.8%
Agree	103	52.6%	. .}		
Undecided	8	4.1%	. .}	8	4.1%
Disagree	11	5.6%	. .}	12	6.1%
Strongly Disagree.	1	0.5%	. .}		
No Response . . .	- -	- -	. .}	- -	- -

Statistical Analysis

Mean 4.204

Standard Deviation . . .803

TABLE 5.13

Question: The salary associated with this job is a major reason for staying.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	5	2.6%	. .}	64	32.7%
Agree	59	30.1%	. .}		
Undecided	22	11.2%	. .}	22	11.2%
Disagree	79	40.3%	. .}	110	56.1%
Strongly Disagree.	31	15.8%	. .}		
No Response . . .	- -	- -	. .}	- -	- -

Statistical Analysis

Mean 2.633

Standard Deviation . . 1.145

TABLE 5.14

Question: I am generally proud of the facility I administer.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	106	54.1%	. .}		
Agree	81	41.3%	. .}	187	95.4%
Undecided	5	2.6%	. .}	5	2.6%
Disagree	4	2.0%	. .}		
Strongly Disagree.	- -	- -	. .}	4	2.0%
No Response . . .	- -	- -	. .}	- -	- -

Statistical Analysis

Mean 4.474

Standard Deviation . . .652

TABLE 5.15

Question: I basically like my job and want to continue in it.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	67	34.2%	. .}	175	89.3%
Agree	108	55.1%	. .}		
Undecided	16	8.2%	. .}	16	8.2%
Disagree	2	1.0%	. .}	4	2.0%
Strongly Disagree.	2	1.0%	. .}		
No Response . . .	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 4.189

Standard Deviation . . .778

Improvement of Programs for the Retarded

The study contained seven (7) questions which focused on the core issue of Improvement of Programs for the Retarded. Tables 5.16 through 5.22 which follow contain data supplied by the participants in response to these questions. Questions addressed in the following pages are:

- | | |
|------------|--|
| Table 5.16 | I perceive litigation as a useful tool to improve the treatment of retarded persons. |
| Table 5.17 | I believe that institutions are basically impervious to significant change imposed from within the facility. |
| Table 5.18 | To significantly improve the treatment of mentally retarded persons, facility administrators must rely upon external assistance. |
| Table 5.19 | The ability of an institution to change is directly related to its size. |
| Table 5.20 | Employee labor organizations constitute a barrier to high quality treatment of retarded persons. |
| Table 5.21 | I personally believe in the development of small community based housing for the retarded. |
| Table 5.22 | I personally support the current public trends toward cost cutting in human service programs. |

TABLE 5.16

Question: I perceive litigation as a useful tool to
improve the treatment of retarded persons.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	17	8.7%	. .}	79	40.3%
Agree	62	31.6%	. .}		
Undecided	39	19.9%	. .}	39	19.9%
Disagree	50	25.5%	. .}	77	39.3%
Strongly Disagree.	27	13.8%	. .}		
No Response . . .	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 2.944

Standard Deviation . . 1.233

TABLE 5.17

Question: I believe that institutions are basically
 impervious to significant change imposed from
 within the facility.

Response

	Number	Percent		Number	Percent
Strongly Agree	- -	- -	. .}		
Agree	14	7.1%	. .}	14	7.1%
Undecided	13	6.6%	. .}	13	6.6%
Disagree	110	56.2%	. .}		
Strongly Disagree.	58	29.6	. .}	168	85.8%
No Response	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 1.903
 Standard Deviation814

TABLE 5.18

Question: To significantly improve the treatment of mentally retarded persons, facility administrators must rely upon external assistance.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	42	21.4%	. .}	128	65.3%
Agree	86	43.9%	. .}		
Undecided	19	9.7%	. .}	19	9.7%
Disagree	41	20.9%	. .}	49	25.0%
Strongly Disagree.	8	4.1%	. .}		
No Response . . .	- -	- -	. .}	- -	- -

Statistical Analysis

Mean 3.577
 Standard Deviation . . 1.159

TABLE 5.19

Question: The ability of an institution to change is
directly related to its size.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	6	3.1%	. .}	65	33.2%
Agree	59	30.1%	. .}		
Undecided	32	16.3%	. .}	32	16.3%
Disagree	72	36.7%	. .}	98	50.0%
Strongly Disagree.	26	13.3%	. .}		
No Response . . .	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 2.714

Standard Deviation . . 1.137

TABLE 5.20

Question: Employee labor organizations constitute a barrier to high quality treatment of retarded persons.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	33	16.8%	. .}		
			}	84	42.8%
Agree	51	26.0%	. .}		
Undecided	44	22.4%	. .}	44	22.4%
Disagree	61	31.2%	. .}		
			}	68	34.8%
Strongly Disagree.	7	3.6%	. .}		
No Response . . .	- -	- -	. .}	- -	- -

Statistical Analysis

Mean 3.214
 Standard Deviation . . 1.161

TABLE 5.21

Question: I personally believe in the development of small, community based housing for the retarded as an alternative to institutional care and treatment.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	70	35.7%	. .}	146	74.5%
Agree	76	38.8%	. .}		
Undecided	26	13.3%	. .}	26	13.3%
Disagree	21	10.7%	. .}	23	11.7%
Strongly Disagree.	2	1.0%	. .}		
No Response . . .	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 3.959
 Standard Deviation . . 1.047

TABLE 5.22

Question: I personally support the current public trends
toward cost cutting in human service programs.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	8	4.1%	. .}	55	28.1%
Agree	47	24.0%	. .}		
Undecided	37	18.9%	. .}	37	18.9%
Disagree	68	34.7%	. .}	103	52.5%
Strongly Disagree.	35	17.8%	. .}		
No Response . . .	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 2.602

Standard Deviation . . 1.166

Ability to Perform the Roles Expected

The study contained seven (7) questions which focused on the core issue of Ability to Perform the Roles Expected of a Superintendent. Tables 5.23 though 5.29 which follow contain data supplied by the participants in response to these questions. Questions addressed in the following pages are:

Table 5.23 I have sufficient personal authority to adequately fulfill my responsibilities.

Table 5.24 Externally imposed parameters significantly limit my ability to provide the leadership necessary for my facility.

Table 5.25 I feel that I personally control all activities and functions of the facility I administer either directly or through others.

Table 5.26 My previous education and experience is adequate preparation for this position.

Table 5.27 For a Superintendent to provide the leadership necessary to significantly improve the treatment of retarded persons may result in personal risks to his or her career.

Table 5.28 This job carries with it a greater than average chance of being dismissed for reasons beyond my personal control.

Table 5.29 Because of the trend toward small, community
 based housing, I am concerned about my
 future.

TABLE 5.23

Question: I have sufficient personal authority to
adequately fulfill my responsibilities.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	20	10.2%	. .}	129	65.9%
Agree	109	55.6%	. .}		
Undecided	14	7.1%	. .}	14	7.1%
Disagree	44	22.4%	. .}	52	26.5%
Strongly Disagree.	8	4.1%	. .}		
No Response . . .	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 3.439

Standard Deviation . . 1.101

TABLE 5.24

Question: Externally imposed parameters significantly
limit my ability to provide the leadership
necessary for my facility.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	54	27.6%	. .}	114	58.2%
Agree	60	30.6%	. .}		
Undecided	11	5.6%	. .}	11	5.6%
Disagree	64	32.6%	. .}	71	36.2%
Strongly Disagree.	7	3.6%	. .}		
No Response . . .	- -	- -	. .}	- -	- -

Statistical Analysis

Mean 3.459

Standard Deviation . . 1.294

TABLE 5.25

Question: I feel that I personally control all activities and functions of the facility I administer either directly or through others.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	5	2.6%	. .}	70	35.8%
Agree	65	33.2%	. .}		
Undecided	18	9.1%	. .}	18	9.1%
Disagree	82	41.8%	. .}	107	54.6%
Strongly Disagree.	25	12.8%	. .}		
No Response . . .	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 2.694

Standard Deviation . . 1.149

TABLE 5.26

Question: My previous education and experience is
adequate preparation for this position.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	34	17.3%	. .}	141	71.9%
Agree	107	54.6%	. .}		
Undecided	10	5.1%	. .}	10	5.1%
Disagree	37	18.9%	. .}	44	22.5%
Strongly Disagree.	7	3.6%	. .}		
No Response . . .	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 3.617

Standard Deviation . . 1.115

TABLE 5.27

Question: For a Superintendent to provide the leadership necessary to significantly improve the treatment of retarded persons may result in personal risks to his or her career.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	57	29.1%	. .}	153	78.1%
Agree	96	49.0%	. .}		
Undecided	8	4.1%	. .}	8	4.1%
Disagree	29	14.7%	. .}	35	17.8%
Strongly Disagree.	6	3.1%	. .}		
No Response . . .	- -	- -	. .}	- -	- -

Statistical Analysis

Mean 3.862

Standard Deviation . . 1.089

TABLE 5.28

Question: This job carries with it a greater than average chance of being dismissed for reasons beyond my personal control.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	41	20.9%	. .}	130	66.3%
Agree	89	45.4%	. .}		
Undecided	13	6.6%	. .}	13	6.6%
Disagree	47	24.0%	. .}	52	26.6%
Strongly Disagree.	5	2.6%	. .}		
No Response . . .	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 3.566

Standard Deviation . . 1.168

TABLE 5.29

Question: Because of the trend toward small community based housing, I am concerned about my personal future.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	1	0.5%	. .}	8	4.1%
Agree	7	3.6%	. .}		
Undecided	10	5.1%	. .}	10	5.1%
Disagree	115	58.7%	. .}	177	90.3%
Strongly Disagree.	62	31.6%	. .}		
No Response . . .	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 1.811

Standard Deviation . . .737

The Nature of the Job

This study contained four (4) questions which focused on the core issue of the actual Nature of the Job of Superintendents of public residential facilities for the retarded. Tables 5.30 through 5.33 which follow contain data supplied by the participants in response to these questions. Questions addressed in the following pages are:

Table 5.30 This job is more demanding than most people perceive.

Table 5.31 The role of Superintendent of a public residential facility for the retarded is a point at which conflicts in values and expectations converge.

Table 5.32 The role of Superintendent of a public residential facility for the retarded is frequently a combative one.

Table 5.33 This job requires me to be more aggressive and demanding than I am by nature.

TABLE 5.30

Question: This job is more demanding than most people
perceive.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	89	45.4%	. .}	168	85.7%
Agree	79	40.3%	. .}		
Undecided	10	5.1%	. .}	10	5.1%
Disagree	18	9.2%	. .}	18	9.2%
Strongly Disagree.	- -	- -	. .}		
No Response . . .	- -	- -	. .}	- -	- -

Statistical Analysis

Mean 4.219

Standard Deviation . . .910

TABLE 5.31

Question: The role of a Superintendent of a public residential facility for the retarded is a point at which conflicts in values and expectations converge.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	12	6.1%	. .}	102	52.0%
Agree	90	45.9%	. .}		
Undecided	50	25.5%	. .}	50	25.5%
Disagree	38	19.5%	. .}	42	21.5%
Strongly Disagree.	4	2.0%	. .}		
No Response . . .	2	1.0%	. .}	2	1.0%

Statistical Analysis

Mean 3.316

Standard Deviation . . .988

TABLE 5.32

Question: The role of Superintendent of a public residential facility for the retarded is frequently a combative one.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	18	9.2%	. .}	116	59.2%
Agree	98	50.5%	. .}		
Undecided	17	8.7%	. .}	17	8.7%
Disagree	58	29.6%	. .}	62	31.6%
Strongly Disagree.	4	2.0%	. .}		
No Response . . .	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 3.332

Standard Deviation . . 1.089

TABLE 5.33

Question: The job requires me to be more aggressive and demanding than I am by nature.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	13	6.5%	. .}	77	39.3%
Agree	64	32.7%	. .}		
Undecided	19	9.7%	. .}	19	9.7%
Disagree	91	46.4%	. .}	99	50.5%
Strongly Disagree.	8	4.1%	. .}		
No Response . . .	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 2.898

Standard Deviation . . 1.123

Impact of the Job upon the Individual

This study contained four (4) questions which focused on the core issue of the Impact of the Job upon the Individual who occupies it. Tables 5.34 through 5.37 which follow contain data supplied by the participants in response to these questions. Questions addressed in the following pages are:

Table 5.34 Frequently this job controls my life beyond what I consider a reasonable level.

Table 5.35 Frequently this job has interfered with my ability to function as a family member.

Table 5.36 This job has probably had an adverse impact upon my health and shortened my life.

Table 5.37 Over a period of time this job has had a positive effect upon me as an individual.

TABLE 5.34

Question: Frequently this job controls my life beyond
what I consider a reasonable level.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	40	20.4%	. .}	111	56.6%
Agree	71	36.2%	. .}		
Undecided	11	5.6%	. .}	11	5.6%
Disagree	64	32.7%	. .}	74	37.8%
Strongly Disagree.	10	5.1%	. .}		
No Response . . .	- -	- -	. .}	- -	- -

Statistical Analysis

Mean 3.342
Standard Deviation . . 1.265

TABLE 5.35

Question: Frequently this job has interfered with my
ability to function as a family member.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	17	8.7%	. .}	100	51.0%
Agree	83	42.3%	. .}		
Undecided	15	7.7%	. .}	15	7.7%
Disagree	75	38.2%	. .}	81	41.3%
Strongly Disagree.	6	3.1%	. .}		
No Response . . .	- -	- -	. .}	- -	- -

Statistical Analysis

Mean 3.153

Standard Deviation . . 1.122

TABLE 5.36

Question: This job has probably had an adverse impact
upon my health and possibly shortened my life.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	11	5.6%	. .}	46	23.5%
Agree	35	17.9%	. .}		
Undecided	41	20.9%	. .}	41	20.9%
Disagree	78	39.8%	. .}	108	55.1%
Strongly Disagree.	30	15.3%	. .}		
No Response . . .	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 2.571

Standard Deviation . . 1.132

TABLE 5.37

Question: Over a period of time this job has had a
positive effect upon me as an individual.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	56	28.6%	. .}	164	83.7%
Agree	108	55.1%	. .}		
Undecided	20	10.2%	. .}	20	10.2%
Disagree	11	5.6%	. .}	12	6.1%
Strongly Disagree.	1	0.5%	. .}		
No Response . . .	- -	- -	. .}	- -	- -

Statistical Analysis

Mean 4.056

Standard Deviation . . .811

Sense of Isolation

This study contained four (4) questions which focused on the core issue of a Sense of Isolation perceived by those who occupy the position of Superintendent. Tables 5.38 through 5.41 which follow contain data supplied by the participants in response to these questions. Questions addressed in the following pages are:

Table 5.38 At times aspects of this job result in feelings of personal isolation.

Table 5.39 I feel it is necessary to take deliberate steps to avoid being consumed by my job.

Table 5.40 Over a period of time I have attempted to socialize less with people with whom I work.

Table 5.41 Frequently I feel many people do not understand the reasons for my actions.

TABLE 5.38

Question: At times aspects of this job result in
feelings of personal isolation.

Response

	Number	Percent		Number	Percent
Strongly Agree . . .	61	31.1%	. . }	166	84.7%
Agree	105	53.6%	. . }		
Undecided	7	3.6%	. . }	7	3.6%
Disagree	21	10.7%	. . }	23	11.7%
Strongly Disagree.	2	1.0%	. . }		
No Response . . .	- -	- -	. . }	- -	- -

Statistical Analysis

Mean 4.031

Standard Deviation933

TABLE 5.39

Question: I feel it is necessary to take deliberate
steps to avoid being consumed by my job.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	23	11.7%	. .}	138	70.5%
Agree	115	58.8%	. .}		
Undecided	11	5.6%	. .}	11	5.6%
Disagree	44	22.4%	. .}	46	23.4%
Strongly Disagree.	2	1.0%	. .}		
No Response . . .	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 3.561

Standard Deviation . . 1.028

TABLE 5.40

Question: Over a period of time I have attempted to
socialize less with people with whom I work.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	18	9.2%	. .}	113	57.7%
Agree	95	48.5%	. .}		
Undecided	18	9.2%	. .}	18	9.2%
Disagree	61	31.1%	. .}	65	33.1%
Strongly Disagree.	4	2.0%	. .}		
No Response . . .	- -	- -	. .}	- -	- -

Statistical Analysis

Mean 3.316

Standard Deviation . . 1.073

TABLE 5.41

Question: I feel many people do not understand the reasons
for my actions.

Response

	Number	Percent		Number	Percent
Strongly Agree . .	14	7.1%	. .}	80	40.8%
Agree	66	33.7%	. .}		
Undecided	22	11.2%	. .}	22	11.2%
Disagree	91	46.5%	. .}	93	47.5%
Strongly Disagree.	2	1.0%	. .}		
No Response . . .	1	0.5%	. .}	1	0.5%

Statistical Analysis

Mean 2.980

Standard Deviation . . 1.086

Analysis and Discussion of Data

This section will analyze and discuss data presented in Chapter V. Each of the six core issues which served as the study focus are presented and discussed separately.

Significant statistical patterns among the data associated with each core issue will be identified and interpreted. For the purpose of this analysis, questions with which sixty-five percent (65 %) of the participants either strongly agreed or agreed are identified as having a "High Level of Agreement." Questions with which sixty-five percent (65 %) of the participants either strongly disagreed or disagreed are identified as having a "High Level of Disagreement." All other questions are identified as having "No Significant Agreement or Disagreement" among the participants.

I. Factors Which Sustain a Person in the Role of Superintendent

Six questions in this study focused on the core issue of Factors Which Sustain a Person in the Role of Superintendent (Tables 5.10 - 5.15). Analysis of the responses to these six questions show an extremely high level of agreement with five questions while no significant level of agreement or disagreement is discovered among the responses to the sixth. The five

questions which show high agreement by the participants are as follows:

High Level of Agreement

1. I have a strong sense of personal responsibility for the well-being of our clients. (Table 5.11)
 Mean Score 4.582 Standard Deviation .680
 Respondents: 195 (99.5%) Strongly Agree or Agree

2. I am generally proud of the facility I administer. (Table 5.14)
 Mean Score 4.474 Standard Deviation .652
 Respondents: 187 (95.4%) Strongly Agree or Agree

3. The feeling that my work is important to the lives of our clients reinforces me more than any other factor in this job. (Table 5.10)
 Mean Score 4.265 Standard Deviation .680
 Respondents: 180 (91.8%) Strongly Agree or Agree

4. Although I have multiple roles I see myself first as an advocate for the clients. (Table 5.12)
 Mean Score 4.204 Standard Deviation .803
 Respondents: 176 (89.8%) Strongly Agree or Agree

5. I basically like my job and want to continue in it. (Table 5.15)
 Mean Score 4.189 Standard Deviation .778
 Respondents: 175 (89.3%) Strongly Agree or Agree

No Significant Agreement or Disagreement

One question which focused on the core issue of Factors Which Sustain a Person in the Role of Superintendent showed a significantly different response pattern from the other five questions. There was no significant level of agreement or disagreement found among the responses to the following question:

1. The salary associated with this job is a major reason for staying. (Table 5.13)

Mean Score 2.633 Standard Deviation 1.145

Respondents: 110 (56.1%) Strongly Disagree
or Disagree

22 (11.2%) Undecided

64 (32.7%) Strongly Agree or Agree

II. Improvement of Programs for the Retarded

Seven questions in this study focused on the core issue of Improvement of Programs for the Retarded (Tables 5.16 - 5.22). The pattern of responses among the participants differs significantly from that reported for the previous core issue. Analysis of these data show a high level of agreement with two questions and a high level of disagreement with one question. No significant level of agreement or disagreement was found among the responses of the participants to four questions addressing this core issue.

The questions which show a high level of agreement or disagreement by the participants are as follows:

High Level of Agreement

1. I personally believe in the development of small, community based housing for the retarded as an alternative to institutional care and treatment. (Table 5.21)

Mean Score 3.959 Standard Deviation 1.047

Respondents: 146 (74.5%) Strongly Agree or Agree

2. To significantly improve the treatment of mentally retarded persons, facility administrators must rely upon external assistance. (Table 5.18)

Mean Score 3.577 Standard Deviation 1.159

Respondents: 128 (65.3%) Strongly Agree or Agree

High Level of Disagreement

1. I believe that institutions are basically impervious to significant change imposed from within the facility. (Table 5.17)

Mean Score 1.903 Standard Deviation .814

Respondents: 168 (85.8%) Strongly Disagree
or Disagree

No Significant Agreement or Disagreement

Analysis of the data indicates that there is no significant level of agreement or disagreement concerning the following four questions which relate to the core issue of Improvement of Programs for the Retarded:

1. Employee labor organizations constitute a barrier to high quality treatment of retarded persons. (Table 5.20)

Mean Score 3.214 Standard Deviation 1.161

Respondents: 84 (42.8%) Strongly Agree or Agree
 44 (22.4%) Undecided
 68 (34.8%) Strongly Disagree
 or Disagree

2. I perceive litigation as a useful tool to improve the treatment of retarded persons. (Table 5.16)

Mean Score 2.944 Standard Deviation 1.233

Respondents: 79 (40.3%) Strongly Agree or Agree
 39 (19.9%) Undecided
 77 (39.3%) Strongly Disagree
 or Disagree

3. The ability of an institution to change is directly related to its size. (Table 5.19)

Mean Score 2.714 Standard Deviation 1.137

Respondents: 98 (50.0%) Strongly Disagree
 or Disagree
 32 (16.3%) Undecided
 65 (33.2%) Strongly Agree or Agree

4. I personally support the current public trends toward cost cutting in human service programs (Table 5.22)

Mean Score 2.602 Standard Deviation 1.166

Respondents: 103 (52.5%) Strongly Disagree
 or Disagree
 37 (18.9%) Undecided
 55 (28.1%) Strongly Agree or Agree

III. Ability to Perform the Roles Expected

This study contained seven questions which focused on the core issue of the Ability to Perform the Roles Expected of a Superintendent. (Tables 5.23 - 5.29) The responses of the participants show strong general agreement with the questions presented in this section. Four of the seven questions have been identified as having a high level of agreement, and one has a high level of disagreement. No significant level of agreement or disagreement was found among the responses of the participants to two questions which address this core issue.

The four questions which show a high level of agreement by the participants are as follows:

High Level of Agreement

1. For a Superintendent to provide the leadership necessary to significantly improve the treatment of retarded persons may result in personal risks to his or her career. (Table 5.27)

Mean Score 3.862 Standard Deviation 1.089

Respondents: 153 (78.1%) Strongly Agree or Agree

2. My previous education and experience is adequate preparation for this position. (Table 5.26)

Mean Score 3.617 Standard Deviation 1.115

Respondents: 141 (71.9%) Strongly Agree or Agree

3. This job carries with it a greater than average chance of being dismissed for reasons beyond my personal control. (Table 5.28)

Mean Score 3.566 Standard Deviation 1.168

Respondents: 130 (66.3%) Strongly Agree or Agree

4. I have sufficient personal authority to adequately fulfill my responsibilities. (Table 5.23)

Mean Score 3.439 Standard Deviation 1.101

Respondents: 129 (65.9%) Strongly Agree or Agree

High Level of Disagreement

1. Because of the trend toward small, community based housing, I am concerned about my future. (Table 5.29)

Mean Score 1.811 Standard Deviation .737

Respondents: 177 (90.3%) Strongly Disagree
or Disagree

No Significant Agreement or Disagreement

Analysis of the data indicates that there is no significant level of agreement or disagreement concerning the two following questions which relate to the core issue of Ability to Perform the Roles Expected of a Superintendent:

1. Externally imposed parameters significantly limit my ability to provide the leadership necessary for my facility. (Table 5.24)

Mean Score 3.459 Standard Deviation 1.294

Respondents: 114 (58.2%) Strongly Agree or Agree

11 (5.6%) Undecided

71 (36.2%) Strongly Disagree
or Disagree

2. I feel that I personally control all activities and functions of the facility I administer either directly or through others. (Table 5.25)

Mean Score 2.694 Standard Deviation 1.149

Respondents: 107 (54.6%) Strongly Disagree
or Disagree

18 (9.1%) Undecided

70 (35.8%) Strongly Agree or Agree

IV. The Nature of the Job

This study contained four questions which focused on the core issue of the actual Nature of the Job of Superintendents of public residential facilities for the retarded (Tables 5.30 - 5.33). Analysis of the responses to these four questions show a high level of agreement with only one question, while no significant level of agreement or disagreement was noted among the responses to the other three questions. The question which shows a high level of agreement by the participants follows:

High Level of Agreement

1. This job is more demanding than most people perceive. (Table 5.30)

Mean Score 4.219 Standard Deviation .910

Respondents: 168 (85.7%) Strongly Agree or Agree

No Significant Agreement or Disagreement

- 1 The role of Superintendent of a public residential facility for the retarded is frequently a combative one. (Table 5.32)

Mean Score 3.332 Standard Deviation 1.089

Respondents: 116 (59.2%) Strongly Agree or Agree

17 (8.7%) Undecided

62 (31.6%) Strongly Disagree
or Disagree

2. The role of Superintendent of a public residential facility for the retarded is a point at which conflicts in values and expectations converge. (Table 5.31)

Mean Score 3.316 Standard Deviation .988

Respondents: 102 (52.0%) Strongly Agree or Agree

50 (25.5%) Undecided

42 (21.5%) Strongly Disagree
or Disagree

3. This job requires me to be more aggressive and demanding than I am by nature. (Table 5.33)

Mean Score 2.898 1.123

Respondents: 99 (50.5%) Strongly Disagree
or Disagree
19 (9.7%) Undecided
77 (39.3%) Strongly Agree or Agree

V. Impact of the Job upon the Individual

This study contained four questions which focused on the core issue of the Impact of the Job upon the Individual who occupies it (Tables 5.34 - 5.37). Analysis of these data indicate a significantly high level of agreement with only one question. The other three questions were found to have no significant level of agreement or disagreement among the responses of the participants. The question which shows a high level of agreement follows:

High Level of Agreement

1. Over a period of time this job has had a positive effect upon me as an individual. (Table 5.37)

Mean Score 4.056 Standard Deviation .811

Respondents: 164 (83.7%) Strongly Agree or Agree

No Significant Agreement or Disagreement

1. Frequently this job controls my life beyond what I consider a reasonable level. (Table 5.34)

Mean Score 3.342 Standard Deviation 1.265

Respondents: 111 (56.6%) Strongly Agree or Agree
 11 (5.6%) Undecided
 74 (37.8%) Strongly Disagree
 or Disagree

2. Frequently this job has interfered with my ability to function as a family member. (Table 5.35)

Mean Score 3.153 Standard Deviation 1.122

Respondents: 100 (51.0%) Strongly Agree or Agree
 15 (7.7%) Undecided
 81 (41.3%) Strongly Disagree
 or Disagree

3. This job has probably had an adverse impact upon my health and shortened my life. (Table 5.36)

Mean Score 2.571 Standard Deviation 1.132

Respondents: 108 (55.1%) Strongly Disagree
 or Disagree
 41 (20.9%) Undecided
 46 (23.5%) Strongly Agree or Agree

VI. Sense of Isolation

This study contained four questions which focused on the core issue of a Sense of Isolation perceived by those who occupy the position of Superintendent. (Tables 5.38 - 5.41) Response to these four questions was mixed. Analysis of the data indicates a significantly high level of agreement with two questions while no significant level of agreement or disagreement is discovered among the

responses to the other two questions. The two questions which show high agreement by the participants follow:

High Level of Agreement

1. At times aspects of this job result in feelings of personal isolation. (Table 5.38)

Mean Score 4.031 Standard Deviation .933

Respondents: 166 (84.7%) Strongly Agree or Agree

2. I feel it is necessary to take deliberate steps to avoid being consumed by my job. (Table 5.39)

Mean Score 3.561 Standard Deviation 1.028

Respondents: 138 (70.5%) Strongly Agree or Agree

No Significant Agreement or Disagreement

1. Over a period of time I have attempted to socialize less with people with whom I work. (Table 5.40)

Mean Score 3.316 Standard Deviation 1.073

Respondents: 113 (57.7%) Strongly Agree or Agree

18 (9.2%) Undecided

65 (33.1%) Strongly Disagree
or Disagree

2. I feel many people do not understand the reasons for my actions. (Table 5.41)

Mean Score 2.980 Standard Deviation 1.086

Respondents: 93 (47.5%) Strongly Disagree
or Disagree

22 (11.2%) Undecided

80 (40.8%) Strongly Agree or Agree

Summary

In this chapter the quantitative data which were collected from the national questionnaire administered to Superintendents of public residential facilities for the retarded in the United States were presented and discussed. The chapter consisted of three major sections:

1. Descriptive Characteristics of the Participants.
2. The Survey Data.
3. Analysis and Discussion of Data.

It seems appropriate to offer generalizations based on these data for two reasons. First, a significant proportion of all Superintendents in the United States took part in this study, strengthening the conclusions reached. Second, those who took part in the study showed discrimination and personal preferences in selecting responses to the questions. The pattern of responses indicates that the participants exercised judgment in selecting among the choices available for each question.

The questionnaire was administered during the months of February and March in 1983. At that time, there were two hundred and seventy-four (274) Superintendents of public residential facilities for the retarded in the United States. One hundred and ninety-six (196) members of the group participated in the study. This figure

represents 71.5% of the universe being studied. Based on this level of participation, it seems appropriate to offer generalizations pertaining to the entire set of Superintendents.

The responses to thirty-two (32) questions were reported in this chapter. In excess of 65% of the participants either strongly agreed or agreed with fifteen (15) of the questions. Similarly, in excess of 65% of the participants either strongly disagreed or disagreed with two (2) of the questions. The responses to the remaining fifteen (15) questions consisted of less than 65% agreement or disagreement among the participants.

The one hundred and ninety-six (196) individuals who participated in this study exercised individual preferences in selecting answers to the questions presented to them. The distribution of their responses to each question differed considerably and showed clear choice patterns. Analysis of mean and standard deviation scores confirms this observation. Table 5.42 which follows shows the discrimination among choices which was exercised by the participants.

TABLE 5.42

All QuestionsMean and Standard Deviation of ResponsesRanked by Mean Score

<u>Question</u>	<u>Mean</u>	<u>Standard Deviation</u>
I feel a strong sense of personal responsibility for the well-being of our clients. (5.11)	4.582	.589
I am generally proud of the facility I administer. (5.14)	4.474	.652
The feeling that my work is important to the lives of our clients reinforces me more than any other factor in this job. (5.10)	4.265	.680
This job is more demanding than most people perceive. (5.30)	4.219	.910
Although I have multiple roles I see myself first as an advocate for the clients. (5.12)	4.204	.803
I basically like my job and want to continue in it. (5.15)	4.189	.778
Over a period of time this job has had a positive effect upon me as an individual. (5.37)	4.056	.811
At times aspects of this job result in feelings of personal isolation. (5.38)	4.031	.933
I personally believe in the development of small, community based housing for the retarded as an alternative to institutional care and treatment. (5.21)	3.959	1.047

<u>Question</u>	<u>Mean</u>	<u>Standard Deviation</u>
For a Superintendent to provide the leadership necessary to significantly improve the treatment of retarded persons may result in personal risks to his or her career. (5.27)	3.862	1.089
My previous education and experience is adequate preparation for this position. (5.26)	3.617	1.115
To significantly improve the treatment of mentally retarded persons, facility administrators must rely upon external assistance. (5.18)	3.577	1.159
This job carries with it a greater than average chance of being dismissed for reasons beyond my personal control. (5.28)	3.566	1.168
I feel it is necessary to take deliberate steps to avoid being consumed by my job. (5.39)	3.561	1.028
Externally imposed parameters significantly limit my ability to provide the leadership necessary for my facility. (5.24)	3.459	1.294
I have sufficient personal authority to adequately fulfill my responsibilities. (5.23)	3.439	1.101
Frequently this job controls my life beyond what I consider a reasonable level. (5.34)	3.342	1.265
The role of Superintendent of a public residential facility for the retarded is frequently a combative one. (5.32)	3.332	1.089
Over a period of time I have attempted to socialize less with people with whom I work. (5.40)	3.316	1.073

<u>Question</u>	<u>Mean</u>	<u>Standard Deviation</u>
The role of a Superintendent of a public residential facility for the retarded is a point at which conflicts in values and expectations converge. (5.31)	3.316	.988
Employee labor organizations constitute a barrier to high quality treatment of retarded persons. (5.20)	3.214	1.161
Frequently this job has interfered with my ability to function as a family member. (5.35)	3.153	1.122
Frequently I feel many people do not understand the reasons for my actions. (5.41)	2.980	1.086
I perceive litigation as a useful tool to improve the treatment of retarded persons. (5.16)	2.944	1.233
The job requires me to be more aggressive and demanding than I am by nature. (5.33)	2.898	1.123
The ability of an institution to change is directly related to its size. (5.19)	2.714	1.137
I feel that I personally control all activities and functions of the facility I administer either directly or through others. (5.25)	2.694	1.149
The salary associated with this job is a major reason for staying. (5.13)	2.633	1.145
I personally support the current public trends toward cost cutting in human service programs. (5.22)	2.602	1.166
This job has probably had an adverse impact upon my health and shortened my life. (5.36)	2.571	1.132

<u>Question</u>	<u>Mean</u>	<u>Standard Deviation</u>
I believe that institutions are basically impervious to significant change imposed from within the facility. (5.17)	1.903	.814
Because of the trend toward small, community based housing, I am concerned about my future. (5.29)	1.811	.737

C H A P T E R V I
PRESENTATION OF THE QUALITATIVE DATA

Introduction

In this chapter the qualitative data collected from the questionnaire administered to Superintendents of public residential facilities for the retarded in the United States will be presented and discussed. These data will be considered in addition to the quantitative data presented in Chapter V in determining the conclusions and recommendations of this study.

Five (5) open-ended questions which solicited the participants' written statements regarding various aspects of their perception of their role as Superintendent were included in the questionnaire. These questions were included in order to give the participants an opportunity to elaborate upon or express thoughts and opinions not included in the thirty-two (32) Likert-type questions which, by design, were more structured.

Data derived from each of the open-ended questions are presented and discussed separately, and are followed by a summary discussion of this component of the study. This chapter is organized into the following sections:

1. Wish to be Remembered as. . .
2. Advice to Young, Talented Persons. . .
3. Reasons to Stay in the Job. . .
4. What might have been done Differently. . .
5. Other Statements. . .
6. Summary. . .

Wish to be Remembered as

The first question included in this section of the questionnaire was:

"As a Superintendent, I wish to be remembered most as the person who. . ."

Analysis of the responses to this question revealed several themes which appeared frequently among the answers provided by the participants. In slightly different ways, and with slightly different expressions, similar patterns appeared to cut across a large number of the responses. These themes occurred with sufficient frequency to justify inclusion in this report.

The first and most frequent theme which appeared among the answers is that the participants genuinely wish to be remembered "for bringing about change" in the programs and services for the clients. The change to which they refer was frequently described as "positive" and

"long-lasting" and was quite common among the responses.

Characteristic of these responses, one participant wants to be remembered as the person who "initiated positive, progressssive change to improve the quality of life for the residents." Another writes about making "very significant changes in the lives of people with handicaps" while another wants to be remembered for "effecting positive change which results in lasting benefits to present residents and clears the way for additional benefits in the future." Another Superintendent wants to be remembered for having "implemented new, creative and positive change for the mentally retarded."

Many of the participants not only want to be responsible for change, but wish to be perceived as a "change agent" as well. This is a term which is frequently used when writing about how they want to be remembered. One Superintendent wants to be remembered as "a change agent - a dreamer who made a commitment and took action to benefit the lives of others." Another wants to be remembered as "a change agent for the mentally retarded at the institution and in the community as well." The issue of being perceived as a person responsible for bringing about effective, long lasting change is of obvious importance to Superintendents of public residential facilities throughout the country.

Being remembered as a person who cared about and tried to improve the quality of life of the retarded persons entrusted to their care is also an issue of importance to Superintendents. Repeatedly this theme cuts across the responses. "I want to be remembered as a person who improved the quality of life for each and every one of our clients." Another wants to be remembered for "improving the quality of life for those mentally retarded persons entrusted to my care," while another writes about "adding some measure of happiness to the lives of handicapped people and their families." Several Superintendents write about improving the quality of life of retarded people by improving their living environments as well as by increasing active programming. One Superintendent simply wants to be remembered for having "made things better for retarded people." The theme is clear.

Another response which was frequently expressed by the participants of this study is the desire of many Superintendents to be remembered as a good administrator. This is clearly identified in various statements. "I want to be remembered most as the person who administered an institution fairly and efficiently and provided quality services for the residents of the institution." One individual states that he wants his facility "to be the

best run nationally," while several others write about accomplishing the mission of the facility "in spite of the system." The desire to be seen as a person who developed and left behind a sound "management system" is expressed by a number of the participants.

Another theme frequently expressed by the Superintendents is the desire to be seen as sensitive to the needs of their staff as well as the clients. When writing about staff, almost without exception the participants want to be seen as "fair" in their relationships. This is very clearly seen in the data. Superintendents also express a desire to be remembered for enabling their staff to develop and operate at their maximum potential. Typical of this is one individual who wrote that he wanted to be remembered for having been "concerned and interested in the growth and development of my employees as well as the clients."

In responding to this question, a few individuals write about the personal characteristics for which they hope they are remembered. Being seen as "fair," "honest" and "caring" are the most frequently expressed desires. In more general terms, they express a desire to be remembered as a good person who worked hard to improve the lives of their clients and staff.

Advice to Young, Talented Persons

The second question included in this section of the questionnaire was:

"If a young, talented person aspired to obtain a job like yours, what advice would you have for him/her?"

Analysis of the responses to this question revealed considerable advice available to persons who may aspire to the position of Superintendent of a public residential facility for the retarded. With very few exceptions, each of the 196 participants of this study answered this question. Most responses appeared to be well founded and in some detail. Overwhelmingly they offered candidates support and encouragement in considering this as a viable career option.

The most frequent form of response to this question addressed the personal characteristics or attributes which the participants feel a candidate for this job should possess or develop. The number of responses to this question which focused on the personal characteristics of the individual indicates that this is an issue of importance to the participants.

"Be creative, humble and tough." "Have compassion and understanding." "Be flexible." These are examples of the type of personal advice which appears with frequency throughout the responses to this question.

Among the forms of advice about personal characteristics of persons aspiring to this position, two appear more frequently and are stated with more force and conviction than the others. They are clearly major themes among the responses.

The first is "to develop the ability to listen." A number of participants expressed this in slightly different forms throughout the data. "Be open, honest and above all listen to those around you." Another says "be open and a good listener." A third wrote, "above all, never stop listening." Developing and maintaining the ability to listen is probably the strongest personal recommendation of the participants.

The second, and closely related, is "to develop the ability to be patient." Frequently this advice was offered in relation to having realistic expectations. One participant wrote: "Learn to accept what you cannot change and what you can, and be patient with the rest." Another wrote: "Don't try to conquer the world. Set realistic objectives and timeframes." A third says somewhat philosophically that "a person must also be realistic enough to know that desired changes may not always occur as rapidly as one wishes." Another sums up both of these points nicely as follows: "In the long run you can be most effective by exercising patience, listening and persuading."

Many of the participants wrote about the need for prior experience before assuming the responsibility of Superintendent. Not only did they stress the need for prior experience, but specifically emphasized that the experience should be broad and diverse. One participant advises persons who may aspire to this position to gain "multiple experiences in working with the mentally retarded and developmentally disabled - all ages and all levels of disability." Another writes about the need to "get a well-rounded experience first" while a third says that one should first "obtain varied experiences in different mental retardation settings and organizations."

Concerning the need for prior experience, the participants stress two particular areas which would benefit aspiring candidates for this position. The first, and most frequently expressed, is the need for a direct working experience with the clients. "Get some good field experience working at the ground level in one of the major disciplines." "Work with the clients in the field first - i.e., cottage staff, classroom instructor or aide, before deciding to move on." Advice to "work up through the ranks" is frequently expressed.

The second specific area of prior experience which the participants emphasize as important is in actual administration and facility management. Ideally, several suggest that it would be very beneficial to work for a

proven administrator as an Assistant Superintendent. It is stressed that this opportunity not only would assist a person prepare for the job of Superintendent but would also enable him or her to determine more clearly if the position is really what he or she wants.

The need to prepare academically for the job of Superintendent is also recognized by the participants of this study. Here too they stress the need for broad-based training; study in various and diverse fields. One person says: "I would recommend a course of study that overlaps the management, fiscal and human service fields." Although no one recommends a highly specialized field of study, the two areas most frequently expressed as important are "management" and "budgeting." Consistent with the expressed need to avoid specialization, however, one participant even suggests "choosing literature and heroes from other fields. Read the likes of Alinsky, King, Jane Addams and Schwietzer."

Another piece of advice which occurred frequently among the responses to this question is the need for Superintendents to keep the needs of the mentally retarded client as their first priority. The responses imply that there is pressure to become preoccupied with other matters and forget the client. "Never lose sight of the reason that we are here - to serve mentally retarded people." In another response, the participant states that one should

"hold onto your basic values of what's right or wrong for your clients." Another participant advises aspiring Superintendents to "be your own person and make decisions which are right for the client." Somewhat dramatically, another participant pleads that we must "sense the urgency of the mentally retarded person's plight." There is concern that the client will be overlooked by people who hold this position.

A few of the responses to this question were negative and urged interested candidates to think of other careers. Although these responses were infrequent and isolated, they were very intense and strongly worded. "To encourage anyone to aspire to my job would be a tragedy - almost a criminal injustice." "This job has become literally impossible." Another urges aspiring candidates to "find another job with less personal hazard." These represent a minority opinion.

On the other side, however, there was considerable support and encouragement for candidates to think of the job of Superintendent as a viable career choice. One participant suggested: "Try it! You'll become addicted." Another enthusiastically added: "Go for it! You'll have a ball." Most, however, were more moderate and offered encouragement while suggesting that the person give it serious thought. "Think about it very carefully! Then go for it - you won't regret it" is a more typical response.

Reasons to Stay in the Job

The third question included in this section of the questionnaire was:

"I stay in this job because. . ."

Among the responses to this question, two very clearly emerge as the strong and obvious choices of the majority of the participants of this study. Both appear consistently and frequently in the data generated by this question.

The first and most frequently expressed response to this question is, very simply, that Superintendents of public residential facilities for the retarded stay in the job because they like it. In excess of fifty percent of the 196 Superintendents who answered this question stated this very clearly. Individuals offered slightly different reasons why they liked their job, but the extent and degree of job satisfaction as a reason for staying in this position was overwhelmingly clear. Some examples of the responses follow:

I enjoy it! I really do!

95 % of the time it's great.

I find it personally rewarding and satisfying.

I like it and have a fair amount of success.

I enjoy the challenge, prestige and power.

The personal satisfaction exceeds the disadvantages.

I receive a great deal of satisfaction and personal pride from improving the quality of life of the residents.

Because of the tremendous personal satisfaction of seeing residents and staff accomplish their goals.

The list and variety of reasons is seemingly endless. The theme, however, is clear and constant. There is a high degree of job satisfaction inherent in the role of Superintendent of a public residential facility for the retarded and it is clearly stated by the participants of this study as a frequent reason for staying in the job.

The second most frequently expressed response to this question indicates that a large number of Superintendents stay in the job because they feel they still have a contribution to make to their programs. A sense of "unfinished business" prevailed in many of the responses as participants wrote about staying to improve or make better that which is already there for retarded persons in their facilities. There is a purpose in their work; to some, it is almost a mission. Many spoke with confidence about their ability to make a positive difference in their programs.

"I stay because of my ability to affect improvement

in the service delivery system for the mentally retarded" is an example of a frequent response. "I believe my skills actually make a difference." "I feel I am making a contribution." Repeatedly this theme appeared throughout the data. One participant summed it up as follows:

I cannot change the world. However, I believe I can change a small piece of the world for retarded people. Right now I receive a great deal of satisfaction and professional pride in improving the quality of life for the residents.

Other reasons were given for staying in the job of Superintendent. One which appeared frequently concerns the challenge associated with the position. Several participants indicated that they stay in the job because of the challenge. They said they simply "enjoy the challenge." Others were more creative in their response.

"I am personally challenged to my limits to provide the most effective programs possible through management." Another writes that "it is a tremendous challenge each and every day to meet the needs of the residents." A third indicates that he stays in the job "because of the challenge to lead disabled people on a tremendous journey." The apparent challenge inherent in the role of Superintendent of a public residential facility for the retarded is a frequently expressed reason for several of the participants of this study to stay in the job.

A few individuals said that they stay "because of

the people," indicating personal relationships with both staff and clients as important to them. Surprisingly few indicated that their salary was a major reason for staying in the job.

Finally, several participants gave a variety of personal reasons for continuing to occupy their present position. "I have several short and long-term goals that I have yet to attain." "To move would be disruptive to my family." "I am too tired to move along." Responses of this type were infrequent and considerably varied.

What Might Have Been Done Differently

The fourth question included in this section of the questionnaire was:

"If you could do it over again, what might you do differently?"

The overwhelming response to this question was "nothing." The majority of participants in this study very clearly indicated that they would basically do nothing different if they had to do it over again. There was some variety in how these statements were expressed, but the message was very clear and constant.

I wouldn't change a thing.

Nothing.

Very little! I am satisfied with my accomplishments.

I feel comfortable with both the progress and decisions I've made.

A few minor tactical changes but nothing significant.

I never really think much of that. I think I've had a great life and this is as interesting and rewarding a job as I could ever have asked for. I really wouldn't change a thing.

A number of Superintendents who participated in this study indicated that they would change their "style of management" if they could do it over again. The sense is that the style which they ultimately developed is effective for them now but they wish they had discovered it sooner. Some even talk about wishing they had "experimented with management styles" earlier in their role as Superintendent.

Related to this, a few participants make reference to specific areas of management which they would like to do over again differently. One wishes he "had recognized the need for team building earlier." Several talk about developing a "better sense of timing" with regard to new initiatives. A few wish they had learned to trust their instincts earlier in their career.

Two particular style issues appear frequently among the responses of the participants. The first is that a large number of participants wish they had proceeded both

"further" and "faster" in bringing about positive change on behalf of the clients of their facilities. "I wish I had been more aggressive in effecting change sooner." "I should have moved faster - I was hesitant." Through the luxury of hindsight, a number of Superintendents share this perspective.

The second frequently expressed opinion is that a large number of the participants now wish they had been "more political" in their approach to the job. One says, "In all probability I would deliberately play more actively the 'political game' with the objective in mind of being more effective on behalf of my clients." Another wishes he had "organized political support for the Center more quickly," while another regrets he "failed to understand 'Big P' politics and the impact that power brokers can have on people interested in making positive change." Still another Superintendent says that if he had to do it over again he would "be more active in pursuing legislation in smoky back rooms." The point which they make is clear.

Several participants say that if they could do it over again they would be "better prepared" at the time they assumed the position of Superintendent. To some this means a need for more experience, particularly working in client programs. To others it means a degree of personal preparation such as "toughening my skin" or "learning to

be more patient." Others wish they had more formal education, including a large number who wish they had finished their Doctorate work. As one participant wrote:

The only thing I regret is not having completed my Ph.D.. This is more of a personal value than anything else, but I still think there is some modicum of truth in the degree as a credit card - especially in this field.

On a more personal basis, several participants said that they would take better care of themselves and their families if they had the opportunity to do it over again. They indicated that the consuming nature of the job can be at some expense to personal and family happiness. Several talk about the need to "pace yourself" and "get away from it all to avoid burnout." Others wrote about a need for outside interests and recreation. One participant summed it up as follows: "I'd attempt to be less personally affected - consumed - by the conflicts of this job."

Other Statements

The fifth and final question included in this section of the questionnaire was:

"This study is an attempt to describe how Superintendents of public residential facilities for the retarded think and feel about their job. Is there any statement about this topic which you'd like to make?"

As one would expect, the responses to this question varied considerably. Many participants left the space blank or indicated that they had nothing further to say. A large number used this as an opportunity to indicate that they were interested in this study and looked forward to reviewing the results. Some were personal messages of encouragement to the researcher.

For those who responded in a thoughtful, detailed manner, it would be inappropriate to attempt to categorize their statements. Each is somewhat unique to the individual. Instead the researcher has chosen simply to list a sample of twenty responses to this question, attempting to give the reader a balanced perspective of the quality, depth and variety of statements offered by the participants. In reviewing these it should be remembered that these statements were voluntarily given by Superintendents of public residential facilities for the retarded in response to a totally unstructured question about their job. As such, they are important to the individuals.

My feelings are mixed! There have been, and still are, times of extreme elation and satisfaction while there are also times of dejection, frustration and even despair. I am thankful the positives far outweigh the negative.

I think it is one of the most uniquely challenging and demanding jobs there is.

After working over 14 years in the field, of which 5 1/2 have been as Superintendent, I feel great pride in the positive effects my personal efforts have had on the quality of life of clients in programs.

Beneath all of the surface grumbling, I believe you'll find in general a group of people for one reason or another who couldn't run away from this commitment to handicapped people.

Don't do it unless you have a personal conviction that the mentally retarded deserve a better chance in life and that you have the ability to have a positive impact in that direction.

I believe that the role of Superintendent has changed a lot over the last ten years and will change significantly in the future. Institutions are dinosaurs. Those administrators who anticipate the changes and help the institutions change accordingly will insure that both they and their organizations will survive.

It's a job which requires the zeal of a missionary, the hide of a rhinoceros, the talent to walk through a mine field unscathed and a tremendous sense of humor. With those characteristics, you might just have a chance of making it.

The personal satisfactions are great and the personal responsibility is extremely satisfying to one who feels that doing things where the results show directly is an important part of this position which is often overlooked.

I think a study like this is important because I am sure there is a relationship between our perceptions and feelings toward our jobs and the types of services offered in our facility.

I like this job. It is challenging and offers many opportunities to be creative and use one's initiative. The most frustrating part, aside from out of touch standard survivors or 'ivory tower' types in [central office] is constantly having to defend the value of the services being provided by this agency. We provide good services and a segment of the D.D. population needs them. There is still the 'institutions are bad' discussions everywhere. Bull!

Twenty-two years of working with and for the retarded, all as Superintendent, have been fulfilling. There are heartaches that go with the job, but they are usually overshadowed by the positive aspects of it.

I believe that the primary role of the Superintendent is to provide every opportunity possible for residents to be placed in the community. The total goal of the institution should be toward that end. All programs and the environment should be directed toward this goal. All staff should be trained and motivated toward the commitment of deinstitutionalization.

Any generalization about the role and feelings of institutional Superintendents should be approached with caution. Each institution has its own personality.

This job is unique in that the place, and all others like it, is considered by many to be regressive and damaging. There is a real possibility such places will not exist in the future, and I am surrounded by a number of people telling me conflicting things to do. It is a job that you really can't understand unless you've done it.

There is an overwhelming feeling that we are in a 'no-win' situation; e.g., standards are established for which resources are not provided; we're held accountable for a myriad of events over which we have very little control; we're constantly subjected to adverse publicity, political machinations and litigation that produce no real benefits, etc., etc., etc..

As financial resources become less available, it will become more difficult to keep the individuals we serve as the primary focus of our efforts. While my management skills have been sharpened over the last few years, my humanistic leanings have suffered somewhat. I suspect that this is a challenge many Superintendents have been or will be facing. How that challenge is resolved is crucial to the evolving job of Superintendents across the nation.

I feel that the push for community alternatives is good for most (not all) clients and that this distinction is not being made. Also, I feel that the current practice of 'putting down' the public facility as a method of pointing out the need for community based facilities is a very dangerous trend and will do much harm if allowed to continue.

I really can't speak for others, but my job has given a lot of meaning to my life. It is a great opportunity and the hassles (unions, budgets, politics, law suits) are insignificant in contrast to the potential for self actualization.

The job is a critical risk, relatively low pay, open to criticism on many fronts and subject to inordinate litigation. Moreover there is usually little job security. Nevertheless it is important to some often neglected people.

It is an honor to lead such an organization. But it is often lonely and frustrating, seeing the needs that cannot be met today, hoping for a better tomorrow.

Summary

This chapter reported on the results of five (5) open-ended questions which solicited written statements from the participants of this study regarding various aspects of their perception of their role as Superintendent of public residential facilities for the retarded. These questions were included in order to give the participants an opportunity to elaborate upon or express thoughts and opinions not included in the thirty-two (32) Likert-type questions which, by design, were more structured.

Most responses to these questions appeared to be

thoughtful and well-founded. Although a number of participants chose to leave all or part of this section blank, the level of participation was sufficient to warrant certain observations and generalizations regarding the responses. The major patterns and themes which emerged in response to each of the five questions were reported in this chapter. These data will be considered in addition to the quantitative data presented in Chapter V in determining the conclusions and recommendations of this study.

C H A P T E R V I I
SUMMARY, CONCLUSIONS, RECOMMENDATIONS
AND PERSONAL REFLECTIONS

Summary

The care and treatment of persons with mental retardation is in a period of rapid and significant change in the United States. A trend has clearly been established in which the use of large institutions to care for the retarded is being phased down and replaced by a system which relies upon community based housing for the retarded as its foundation. The shift in public policy away from institutions toward community based care for persons who are mentally retarded is commonly referred to as the deinstitutionalization movement.

Superintendents of public residential facilities for the retarded occupy a unique position during this period of time. They are being asked to provide the leadership and direction necessary to accelerate the shift away from the institutions for which they are responsible. As institutions are reduced in size or closed, the role of Superintendent is changed significantly and, in some cases, eliminated.

Understanding the thoughts and opinions of Superintendents of public residential facilities for the retarded

is important to the deinstitutionalization movement in the United States. Because of the dramatic shift away from institutions toward community based care for the retarded in this country, the perception which these individuals have of various aspects of their role is significant. The purpose of this study was to survey perceptions of Superintendents of public residential facilities for the retarded in the United States regarding various aspects of their role during a period of significant philosophical and programmatic change.

This study consisted of two parts. The first was a case study of three Superintendents of public residential facilities for the retarded in which specific role issues of importance to these individuals were identified and recorded. The second was a survey of all Superintendents in the United States based upon the data generated through the case study.

The case study consisted of tape recorded, unstructured interviews of the three participants. These interviews followed an interview guide which was developed by the researcher based upon the literature as well as his knowledge and experience as a Superintendent of a public residential facility for the retarded. The tape recordings were transcribed and the data analyzed by both listening to the recorded discussion and studying the written transcription of the interviews.

Inductive content analysis of these data led to the identification of six core issues of importance to the case study participants regarding their perspective of their role as Superintendent. These six core issues served as the basis of the questionnaire which was administered nationally to all Superintendents. The core issues identified through this process were:

1. Factors which sustain a person in the role of Superintendent.
2. Improvement of programs for the retarded.
3. Ability to perform the roles expected of a Superintendent.
4. The nature of the job.
5. Impact of the job upon the individual.
6. Sense of isolation in the job of Superintendent.

Based upon these core issues, a draft of a questionnaire to be administered nationally to all Superintendents in the country was developed and discussed in a group meeting with the case study participants. The questionnaire was then modified and discussed at a second meeting. In this way agreement was reached among the case study participants that the national survey instrument reflected the core issues of the group.

The national questionnaire used in this study consisted of two parts. One contained thirty-two (32)

statements for which the participants were asked to record their agreement or disagreement according to a five point Likert-type scale. The second consisted of five open-ended questions which solicited written statements from the participants regarding the perception they have of various aspects of their role.

The questionnaire was pre-tested in a group meeting by five (5) Superintendents of public residential facilities for the retarded. Based upon their actual use and subsequent group discussion of the instrument, final modifications were made to the questionnaire before it was used nationally.

This study was endorsed by the National Association of Superintendents of Public Residential Facilities for the Mentally Retarded. (N.A.S.P.R.F.M.R.) The questionnaire was administered in a group meeting of this association to fifty-eight (58) Superintendents of public residential facilities for the retarded. It was then mailed to the two-hundred and fifteen (215) Superintendents throughout the country who were not in attendance at the group meeting. Of the two-hundred and seventy-four (274) Superintendents recorded by the National Association of Superintendents of Public Residential Facilities for the Mentally Retarded in February of 1983, one hundred and ninety-six (196) participated in this study. This represents 71.5 % of the

universe.

Review of the literature in the area of research design and methodology supports the design of this study. The case study component of this project utilized qualitative methodology in attempting to identify role issues of concern to Superintendents of public residential facilities for the retarded. The national questionnaire was based on the outcome of the case study and relied upon quantitative methodology to measure the extent of agreement or disagreement in the universe of Superintendents concerning the identified role issues. Research design which combines methodologies in this way is supported in the literature.

Review of the literature concerning trends and issues regarding services to the mentally retarded in the United States also supports the need for this study. National statistics revealed in this study show a dramatic decline in the number of mentally retarded persons cared for in institutions and a rapid increase in the number of community residences for the retarded during the past decade. Pertinent literature suggests that this shift in public policy has been facilitated by changing public attitudes, critical professional opinion and the use of the courts by advocates for the retarded. The literature recognizes the obvious dilemma which this trend has created in the role of Superintendent.

This study is significant because of the added insight it gives into the personal thoughts, feelings and perceptions of public residential facility Superintendents during an important period in the evolution of services to the retarded in the United States. This knowledge does not appear to be available elsewhere in an organized, comprehensive format.

Conclusions

The conclusions drawn from the data reported in this study are as follows:

1. Superintendents of public residential facilities for the retarded exhibit a high degree of job satisfaction, are genuinely proud of the facilities they administer and wish to continue in their jobs.
2. The job satisfaction which Superintendents of public residential facilities for the retarded exhibit is related to strong feelings of personal responsibility which Superintendents have for the mentally retarded clients of their facilities.
3. Superintendents of public residential facilities for the retarded believe in the development of small, community based housing for the retarded as an alternative to institutional care and treatment and

are not concerned about their personal future because of this trend.

4. Superintendents of public residential facilities for the retarded believe that providing the leadership necessary to significantly improve the treatment of retarded persons may result in personal risks to the career of the Superintendent.
5. Superintendents of public residential facilities for the retarded believe that it is possible to effect significant change of institutions from within facilities.
6. Superintendents of public residential facilities for the retarded are undecided whether employee labor organizations constitute a barrier to high quality treatment of retarded persons.
7. Superintendents of public residential facilities for the retarded are undecided whether litigation is a useful tool to improve the treatment of retarded persons.
8. Superintendents of public residential facilities for the retarded would like to be perceived as change agents who improve the quality of life of retarded persons and bring about positive, progressive change

in programs and services.

9. Superintendents of public residential facilities for the retarded perceive the job of Superintendent as more demanding than most people realize, frequently controlling their lives beyond what they consider a reasonable level.
10. Superintendents of public residential facilities for the retarded feel that it is necessary to take deliberate steps to avoid being consumed by the job.
11. Superintendents of public residential facilities for the retarded feel that at times aspects of the job result in feelings of personal isolation.
12. Superintendents of public residential facilities for the retarded believe that over a period of time the job has had a positive effect upon them as individuals.

Recommendations

The researcher would like to suggest the following areas of study which might provide useful information and expand upon the knowledge gained in this study:

1. It is recommended that this study be repeated after at least three years to determine if there are any

significant changes in the role perception of Superintendents of public residential facilities for the retarded at that time.

2. It is recommended that a study be conducted comparing the role perceptions of Superintendents who have served as named defendants in litigation aimed at deinstitutionalization with the role perceptions of Superintendents who have not personally served in this role.
3. It is recommended that a study similar to this be conducted concerning the role perception of Superintendents of public residential facilities for the emotionally disturbed in order to identify the extent to which that group shares the conclusions of this study.
4. It is recommended that a study be conducted to examine in detail the causative factors which contribute to the feeling of personal isolation identified among the participants of this study.
5. It is recommended that a study be conducted ascertaining the relationship between identified personal characteristics of Superintendents and the conclusions of this study.

Personal Reflections

The purpose of this study was to gain insight into the actual perceptions which Superintendents of public residential facilities for the retarded have about various aspects of their role. As such, the focus of this study was the perceptions of Superintendents as they reported them. The conclusions and recommendations of this study are based entirely upon the reported perceptions and no attempt was made to compare them with other factors. The value of this study is the knowledge added concerning the manner in which Superintendents see themselves and would like to be seen by others.

When one compares the profile of Superintendents presented by the participants of this study with factors outside of the realm of this study, possible inconsistencies emerge. Although not a component of this study, at least two are worthy of personal comment.

The first possible inconsistency concerns the picture which Superintendents paint of themselves as change agents. Very clearly this study reports a strong desire on the part of Superintendents to be perceived as change agents. They wish to be remembered for having improved the quality of life of retarded persons, and state their belief that providing the leadership necessary to accomplish this may result in personal risks.

It can be said, however, that the history of services for the retarded contradicts this self portrait. As the literature which was reported in this study reflects, much of the impetus for improved services for the retarded has been imposed upon public residential facilities for the retarded by external forces. Media expose's, advocacy systems and critical professional opinion are all credited with forcing institutional change from outside of the system. Most significantly, the widespread use of litigation, in which Superintendents are often named as defendants in cases aimed toward improving services for the retarded, is a clear example of the role which external forces have played in bringing about change.

This does not imply that Superintendents have not been sympathetic to the need for change nor worked toward it. The point is that experience thus far has indicated that most significant change on behalf of retarded persons has been brought about by forces other than Superintendents of public residential facilities for the retarded. History has not credited Superintendents with this role. Concerning this aspect of their perception of themselves as reported in this study, a question must be raised as a possible area of inconsistency.

A second point worthy of comment concerns the relationship between the nature of the job as reported by

the Superintendents and the impact upon the individual. The participants of this study report that the job is more demanding than most people perceive, that it controls their lives beyond what they consider a reasonable level and they have to take deliberate steps to avoid being consumed by it. They also report that at times aspects of the job result in feelings of personal isolation.

Yet participants in this study simultaneously report that they are genuinely proud of the facilities they administer, like their jobs and want to continue in them. They also report that over a period of time the job has had a positive effect upon them as individuals.

When these two sets of statements are compared, a second possible point of inconsistency emerges. Although the pressures and demands of the job are seen by the participants as negative, the overall impact upon them is perceived as positive. Several possible explanations might be offered to explain this apparent contradiction. Some of these might focus upon the personality type of the individuals who occupy such a position for partial explanations.

This study describes aspects of the role of Superintendent of public residential facilities for the retarded as seen through the eyes of persons who occupy that role. The study describes these perceptions in detail and bases conclusions upon them, but makes no

attempt to reconcile them with other factors such as those identified in this section. It is hoped that others will do so.

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APPENDIX 1

THE CASE STUDY INTERVIEW GUIDE

INTERVIEW GUIDE

The interviews with the case study participants will be guided according to the following general topic areas.

1. How do you really feel about your job? Do you like it, dislike it, or are you indifferent? How strong are these feelings?
2. How do you think other people perceive you in your job? (i.e., staff, friends, family etc.) Do you think they respect you? Are they envious, or do you think they feel sorry for you? Do you think they look upon your job the same way you do?
3. How do you think this job impacts upon various aspects of your life; your health, general outlook on life, relationships with friends or family, etc.? How would you describe the overall impact which you feel your job has had upon you as an individual?
4. What concerns or worries you the most about your job? What gives you the greatest sense of satisfaction?
5. In the final analysis, by what criterion should your tenure in this job be assessed?

6. Tell me what you think the future holds for you in this job.
7. In the years ahead, how do you want your tenure in this job to be remembered? For what do you want to be remembered the most?

APPENDIX 2

NATIONAL QUESTIONNAIRE COVER LETTER

February 4, 1983

Dear Colleague,

I am sorry you were unable to join us at the National Association of Superintendents Annual meeting in Orlando last week. It was very successful and helpful to those who attended.

At that meeting the attached Questionnaire was completed by the Superintendents in attendance. It is now being mailed to the remainder of the group to participate in this survey.

Would you kindly complete the attached Questionnaire and return it to me by February 25. It should only take a few minutes of your time and your participation in this survey is important.

Thank you for your assistance and cooperation.

Very truly yours,

Daniel J. O'Connell
Superintendent
Hartford Regional Center
71 Mountain Road
Newington, CT. 06111

DJO:TRD
Enclosure

APPENDIX 3

THE NATIONAL QUESTIONNAIRE

ROLE PERCEPTION OF SUPERINTENDENTS OF
PUBLIC RESIDENTIAL FACILITIES FOR THE RETARDED

A NATIONAL SURVEY

By:

DANIEL J. O'CONNELL
Superintendent
Hartford Regional Center
Newington, CT. 06111

*National Association of Superintendents of
Public Residential Facilities for the Mentally Retarded*

National Association of Superintendents of Public Residential Facilities for the Mentally Retarded

9901 Braddock Road, Fairfax, VA 22032

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February 1, 1983

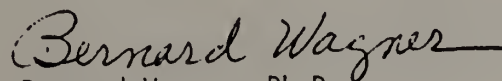
Dear Colleague,

In June the Executive Board voted to endorse and participate in a study being conducted by Dan O'Connell, Superintendent of the Hartford Regional Center concerning "Role Perception of Superintendents of Public Residential Facilities for the Retarded."

This project is of special interest to the National Association. Information from it should add to our mutual understanding of how Superintendents are thinking and feeling about their role these days. All of the data will be made available to the Board and hopefully shared with the membership in the form of a Position Paper.

I am asking for your assistance and participation in this study. Thank you for your cooperation.

Sincerely,



Bernard Wagner, Ph.D.
President

A NATIONAL SURVEY

ROLE PERCEPTION OF SUPERINTENDENTS OF
PUBLIC RESIDENTIAL FACILITIES FOR THE RETARDED

Directions: The purpose of this study is to determine how Superintendents of Public Residential Facilities for the Retarded think and feel about various aspects of their job. Superintendents of all facilities throughout the country are being asked to complete this survey. Participants will remain anonymous.

In the section that follows, read each statement and immediately circle the one of the five possible answers which most closely describes the degree to which you agree or disagree with this statement. This is an attempt to record your impressions. There are no correct or incorrect answers. It is important to answer all questions.

Please send your completed response to:

Daniel J. O'Connell, Superintendent
Hartford Regional Center
71 Mountain Road
Newington, Connecticut 06111
(203) 666-1471

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S A M P L E

Strongly Agree-SA Agree-A Undecided-U Disagree-D Strongly Disagree-SD

Sample:

I enjoy completing questionnaires.

If you agree with this statement, you would circle "A"

SA A U D SD

Thank you for your assistance.

Section I

	Strongly Agree-A	Agree-A	Undecided-U	Disagree-D	Strongly Disagree-SD	
1. The feeling that my work is important to the lives of our clients reinforces me more than any other factor in this job.	1	SA	A	U	D	SD
2. I am generally proud of the facility I administer.	2	SA	A	U	D	SD
3. At times aspects of this job result in feelings of personal isolation.	3	SA	A	U	D	SD
4. Frequently this job controls my life beyond what I consider a reasonable level.	4	SA	A	U	D	SD
5. Externally imposed parameters significantly limit my ability to provide the leadership necessary for my facility.	5	SA	A	U	D	SD
6. Over a period of time this job has had a positive effect upon me as an individual.	6	SA	A	U	D	SD
7. To significantly improve the treatment of mentally retarded persons, facility administrators must rely upon external assistance.	7	SA	A	U	D	SD
8. For a Superintendent to provide the leadership necessary to significantly improve the treatment of retarded persons may result in personal risks to his or her career.	8	SA	A	U	D	SD
9. This job is more demanding than most people perceive.	9	SA	A	U	D	SD
10. Employee labor organizations constitute a barrier to high quality treatment of retarded persons.	10	SA	A	U	D	SD
11. Frequently this job has interfered with my ability to function as a family member.	11	SA	A	U	D	SD
12. The salary associated with this job is a major reason for staying.	12	SA	A	U	D	SD
13. Although I have multiple roles I see myself first as an advocate for the clients.	13	SA	A	U	D	SD
14. I personally support the current public trends toward cost cutting in human service programs.	14	SA	A	U	D	SD
15. Over a period of time I have attempted to socialize less with people with whom I work.	15	SA	A	U	D	SD

16. I feel a strong sense of personal responsibility for the well being of our clients.	16	SA	A	U	D	SD
17. I perceive litigation as a useful tool to improve the treatment of retarded persons.	17	SA	A	U	D	SD
18. I personally believe in the development of small, community based housing for the retarded as an alternative to institutional care and treatment.	18	SA	A	U	D	SD
19. I have sufficient personal authority to adequately fulfill my responsibilities.	19	SA	A	U	D	SD
20. My previous education and experience is adequate preparation for this position.	20	SA	A	U	D	SD
21. This job has probably had an adverse impact upon my health and possibly shortened my life.	21	SA	A	U	D	SD
22. Frequently I feel many people do not understand the reasons for my actions.	22	SA	A	U	D	SD
23. Because of the trend toward small community based housing, I am concerned about my personal future.	23	SA	A	U	D	SD
24. This job carries with it a greater than average chance of being dismissed for reasons beyond my personal control.	24	SA	A	U	D	SD
25. I believe that institutions are basically impervious to significant change imposed from within the facility.	25	SA	A	U	D	SD
26. The ability of an institution to change is directly related to its size.	26	SA	A	U	D	SD
27. The role of a Superintendent of a public residential facility for the retarded is a point at which conflicts in values and expectations converge.	27	SA	A	U	D	SD
28. The job requires me to be more aggressive and demanding than I am by nature.	28	SA	A	U	D	SD
29. I feel it is necessary to take deliberate steps to avoid being consumed by my job.	29	SA	A	U	D	SD
30. The role of Superintendent of a public residential facility for the retarded is frequently a combative one.	30	SA	A	U	D	SD
31. I feel that I personally control all activities and functions of the facility I administer either directly or through others.	31	SA	A	U	D	SD
32. I basically like my job and want to continue in it.	32	SA	A	U	D	SD

Section II

Please provide a complete answer to each of the following questions. If more space is required, please use the other side of this paper.

1. As a Superintendent, I want to be remembered most as the person who _____

2. If a young, talented person aspired to obtain a job like yours, what advise would you have for him/her? _____

3. I stay in this job because _____

4. If you could do it over again, what might you do differently? _____

5. This study is an attempt to describe how Superintendents of Public Residential Facilities for the Retarded think and feel about their job. Is there any statement about this topic which you'd like to make? _____

Section III

The following information will be used to provide a general description of the individuals who have participated in this study. Please complete all questions.

Number of years in Present Position	_____	Previous number of years as Superintendent of another Facility	_____
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Highest Degree Attained	_____	Number of Campus Residents	_____
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Number of Residents in Community Facilities	_____	Number of Staff	_____
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Agency Budget for Current Fiscal Year	_____	Age	
		Under 30	_____
		51 - 55	_____
		31 - 35	_____
		56 - 60	_____
		36 - 40	_____
		61 - 65	_____
		41 - 45	_____
		66 - 70	_____
		46 - 50	_____
		Over 70	_____

Sex _____

Salary (to nearest
thousand) _____

Please send completed
surveys to:

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